



Foreign Area Officer (FAO) In-Country Training (ICT) Guide

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**Headquarters, Department of the Army
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For Operations and Plans
DAMO-SSF**

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CHAPTER 1

INTRODUCTION

1. The purpose of this guide is to provide the FAO trainee with information on requirements and procedures to be used while conducting In-Country Training (ICT).
2. ICT is designed to achieve regional expertise by combining language instruction with firsthand practical experience in the region. ICT prepares officers for utilization in key politico-military positions.
3. This is only a guide. Each of our ICT sites is different and it would be impossible to thoroughly explain or anticipate every scenario. Use this manual as a source of information but ensure you have also consulted with your ICT supervisor to determine any special circumstances that may apply to your site. Each ICT site has an information paper that will provide you with site-specific information. When in doubt, call the Proponent. Remember the Regional Program Managers in DAMO-SSF are here to work with and support you and your ICT program. If, after reading this guide, you have any questions about the conduct of FAO ICT, please telephone, fax or e-mail the appropriate regional training manager for further discussion.
4. Immediately after arrival in country you should establish contact with the Proponent, preferably by e-mail. Maintaining effective communications between ICT sites and the Proponent is essential to maximizing the ICT experience. All communications should go through your respective regional manager.
5. You should check the PERSCOM <http://www.perscom.army.mil/opfamos/fa48.htm> and Proponent <http://www.fao.army.mil> web sites for current functional area news.

CHAPTER 2

IN-COUNTRY TRAINING OBJECTIVES AND METHODS

1. Objectives. The goal of ICT is for the officer to achieve regional expertise by combining language instruction with firsthand practical experience in the region. Objectives of ICT are to: identify and understand U.S. interests as they apply to countries within the region; improve language fluency; develop a detailed knowledge of the region; acquire a firsthand practical sense of the country and region; and begin the process of building contacts within the region that will provide the officer the means to serve effectively in key political-military positions. Specific educational objectives are divided into eight areas.

a. **Language Proficiency.** Attain a professional foreign language ability through daily reading, listening, speaking and writing. Improve DLPT scores at the conclusion of training.

b. **Military.** Know the service capabilities, present leadership, key military contemporaries, operational concepts, and force structure of the host nation's forces. Gain a familiarity of other forces within the region.

c. **Geography and Demography.** Acquire a detailed appreciation for the major physical features of the country and a general appreciation of the key geographic features of the region. Understand spatial relationships of political, cultural/ethnic, economic and transportation structures/patterns in the country/region. Understand matters of demographics, to include ethnic and religious composition, population growth and distribution and their relationship to issues of health, education, and ecology and their impact on the country and the region.

d. **Economic.** Gain a firsthand knowledge of the local economic structures and the key features of the region's economic systems. Understand "informal" economies, as they exist, and the relationship between political and legal systems and the development of foreign investment. Understand the national demands placed upon these economic systems and how the local populations view economic issues.

e. **Culture.** Gain an in-depth understanding of the social, ethnic and religious aspects of the region's cultures and how they impact the economic, political and military policies within the region.

f. **Political and Foreign Affairs.** Know in detail how the region/country functions, both officially and unofficially (who decides what and how), including the mechanics of the bureaucracy in actual practice; know the political leadership. Gain an understanding of the foreign policies of countries in the region; understand sources of commonality and of friction. Know U.S. foreign policy as it pertains to the country and region and the U.S. regional engagement activities to realize them.

g. Interpersonal Skills/Contact: Gain the ability to use conversations, news reports, visual observations, and first or second person contacts to form a clear understanding of the local and regional situation when integrated with other background data; develop professional contacts with both military and civilian representatives in the host country and the region.

h. Country Team Structure and Operations. Understand the Country Team structure, formal and informal lines of communication and basic organizational structure. Learn how embassies work.

2. Factors Relating to In-Country Training (ICT) Objectives.

a. During ICT, you should continue academic studies of your designated region. No two ICT sites or programs are exactly alike. The focus of your individual study depends, to a large extent, on local conditions, your background, and previous training.

b. As a minimum, your program should include advanced language training, regional exposure and contacts with both military and civilian elements of the local population. To obtain the best results, you should develop and read an extensive reading list, conduct research, conduct visits to military units and civilian and government organizations, observe training where appropriate, participate in seminars, formal military and/or civil schooling and conduct in-country/regional travel to amplify, clarify and verify previous study.

c. Language fluency is a necessary tool to achieve maximum benefit from other training opportunities. You must continue to develop this critical skill during ICT. The amount and length of time devoted to language training depends on the degree of difficulty of the language, your proficiency level upon arrival in-country, and on your language aptitude. An aggressive reading program, including local newspapers, books, magazines and periodicals will help develop language proficiency and enhance your knowledge.

d. Attendance at a host country military school is the preferred vehicle for immersion during ICT. The optimal length of instruction is six to ten months. This permits the FAO to complete ICT in a period of approximately one year (critical for a FAO's career development). Appropriate courses include Staff College, CAS3-equivalent schools, or advanced courses. It is important to remember that attending a foreign military school is only a means toward achieving ICT objectives. The purpose of ICT is not to attend a specific foreign military course.

e. In countries where attendance at a military school is not possible, alternative programs have been established. You must ensure that your individual Program of Instruction (POI) meets ICT objectives as listed in paragraph 1, above (see Chapter 3 for POI guidance).

f. FAOs are regional specialists. To develop these skills, the student is provided in-country and regional travel opportunities. Specific instructions on regional travel are provided in Chapter 6.

g. In addition to trip reports (discussed in Chapter 5), you may, under the guidance of your ICT supervisor, prepare research or study projects. These projects should deal with current politico-military issues.

h. Opportunities to participate in government or civilian seminars concerning the region should not be overlooked. Seminars provide an opportunity to become acquainted with local specialists and their thoughts.

i. Circumstances may occur where none of the above training opportunities are available for part of the ICT assignment. Arranging an informal, e.g., unofficial and non-binding, liaison tour with the host nation military is a viable alternative. Depending upon the specific country, other means may be available to achieve ICT objectives. The alternatives are limited only by the imagination and savvy of the FAO student and supervisor.

j. Regardless of the training methods identified as best suited for each FAO student, DAMO-SSF must approve individual programs of instruction. The approval process is accomplished with the submission of a formal POI and its approval by DAMO-SSF. The POI process is discussed in Chapter 3.

k. You will normally work under the direct supervision of an Army Attaché, Security Assistance Officer, or other FAO.

3. There is only one absolute rule, which applies to all ICT FAOs; **NO INTELLIGENCE COLLECTION**. FAO trainees are prohibited from being involved in, or associated with, intelligence collection. The FAO trainee must be very careful not to do anything that could give the **perception** he/she is involved in any type of intelligence-related activities. Any perception by the host nation that the FAO trainee is involved in such activities will likely lead to being denied travel, social and training opportunities and could result in the FAO being asked to leave the host country. FAO trainees can report observations but may not respond to intelligence taskings. Remember that during your ICT assignment you will most likely be observed by host nation agencies. The positive impression that you create as a visiting student will further the FAO program. On the other hand, adverse information will spread quickly and could endanger the future of the ICT Program.

4. Current FAO In-Country Training Programs:

48B - Latin America

<u>Country</u>	<u>Program Base</u>
Argentina	Command and Staff College/Advanced Course
Bolivia	Command and Staff College/Advanced Course
Brazil	Command and Staff College/Advanced Course
Chile	Command and Staff College
Ecuador	Advanced Course
Guatemala	Command and Staff College/Advanced Course
Mexico	Command and Staff College
Peru	Command and Staff College
Uruguay	Command and Staff College
Venezuela	Command and Staff College/Advanced Course

48C – Europe

<u>Country</u>	<u>Program Base</u>
Austria	Command and Staff College
Belgium	CAS3 Equivalent Command and Staff College
Czech Republic	Staff School
Croatia	Command and Staff College
France	CAS3 Equivalent
Germany	Military Visits
Greece	Command and Staff College
Hungary	CAS3 Equivalent
Italy	Command and Staff College Orientation Course
Luxembourg	Embassy Internship
Netherlands	CAS3 Equivalent
Norway	Command and Staff College
Poland	Command and Staff College
Portugal	Command and Staff College
Romania	Command and Staff College/War College
Spain	CAS3 Equivalent

48D – South Asia

<u>Country</u>	<u>Program Base</u>
Bangladesh	Command and Staff College
India	Command and Staff College
Pakistan	Command and Staff College

48E – Eurasia

<u>Country</u>	<u>Program Base</u>
Estonia	Baltic Defense College
Eurasia	George C. Marshall European Center for Security Studies, Garmisch, Germany

48F – China

<u>Country</u>	<u>Program Base</u>
China	Advanced Language Training, Capital Normal University - Beijing

48G – Middle East/North Africa

Country

Egypt
Jordan
Kuwait
Morocco
Oman
Saudi Arabia
Tunisia

Turkey

Program Base

Various Military Courses/USDAO Internship
Officer Advanced Course Equivalent
OMC Kuwait Internship/Command and Staff College
Command and Staff College/ODC internship
Command and Staff College
USMTM Internship
Advanced Language Training - Foreign Service Institute,
USDAO Internship, Command and Staff College
Command and Staff College

48H – Northeast Asia

Country

Japan
S. Korea

Program Base

Advanced Language Training, Inter-University Center
Language Training - Sogang University/Command and Staff College

48I – Southeast Asia

Country

Indonesia
Malaysia
Philippines
Singapore
Thailand
Vietnam

Program Base

Command and Staff College
Command and Staff College
Command and Staff College
Associate Fellowship, Institute for Southeast Asian Studies (Think Tank)
Command and Staff College
Language Training, Hanoi Foreign Language College

48J – Sub-Saharan Africa

Country

Botswana
Cameroon
Cote d'Ivoire
Ethiopia
Niger
Senegal
Zimbabwe

Program Base

USODC Internship
USDAO Internship/Staff College
USDAO Internship
USDAO Internship
Embassy Internship
DAO Internship
Command and Staff College

CHAPTER 3

PROGRAM OF INSTRUCTION (POI) AND OER ISSUES

1. The POI is a performance-oriented plan that delineates specific, individual training objectives and details how those objectives will be attained. The POI is used as the basis for developing your DA Form 67-9-1, Officer Evaluation Report Support Form. It is a tool through which you define what you intend to accomplish during your training. In most cases, much of the POI will be built around a host nation military school or advanced language training program, but, regardless of the base, there is room for a good deal of personal and mentor input in all ICT programs.

2. You must prepare and submit your POI within thirty days of arrival on station. The POI is a flexible document that sets initial goals and is written in standard military memorandum format. The POI is submitted through your ICT rater and senior rater to DAMO-SSF for approval. Your Regional Manager at DAMO-SSF will provide feedback and approval with comments, as appropriate. A copy of the POI should also be sent to the FAO coordinator at DLI, Monterey, for inclusion in the FAO reference library.

3. Tailor the POI to meet your particular needs and level of training. While you should review your predecessor's POI, remember that no two FAOs report for ICT with exactly the same skill level, training, or experience.

4. As a minimum, the POI should address the following:

a. References (DAMO-SSF MOI and local SOP).

b. Purpose.

c. General.

(1) OER Rating Scheme (names and positions).

(2) Tour length: start/projected end dates.

d. Training Objectives. These are tailored to the individual but should support the objectives stated in this MOI.

e. Training Plan.

(1) Description of the ICT program to include a description of each school, project or duty in sufficient detail, to include:

(a) Name of school/program/duty.

(b) Purpose (relation to training objectives).

- (c) Location.
 - (d) Period of training.
 - (2) Language Training Plan. Builds toward improving your DLPT score.
 - (3) Reading Plan.
 - (4) Travel Plan.
 - (a) Prioritized list of projected travel.
 - (b) Purpose (relation to training objectives).
 - (c) Projected period of travel (include number of days in each country or region).
 - (5) An alternative training plan is recommended if obstacles to the POI are probable, e.g., cancellation of a school, lack of travel funds, etc.
 - (6) A timeline or calendar appendix depicting major activities.
 - (7) Training plans should be consistent with budget estimates. Approval of the POI is not a guarantee that all projected travel can be funded.
5. As new training opportunities occur or are developed by the trainee and supervisor, the POI should be revised and resubmitted to DAMO-SSF. Significant changes to the POI must be approved by DAMO-SSF.
6. OER. The OER continues to be the most important report an officer receives. It is crucial you take the time to work with your Rater and Senior Rater in the development of both your POI and OER Support Form (DA Form 67-9-1).
- a. If developed properly, the POI will serve as the primary source of data for your OER Support Form. However, there are normally other significant responsibilities that should be addressed. These may include; budget development, management and execution; property accountability; vehicle maintenance and accountability; and other duties as assigned by your rater. Take the time to properly execute this requirement and update it as necessary.
 - b. You must ensure a valid rating chain exists. This is crucial since each ICT site is different and the rating chain may change based on grade, dates of rank and officer availability. Immediately upon arrival, you should discuss your rating chain with your supervisor. Notify your Regional Training Manager at DAMO-SSF when the rating scheme has been locked. If necessary, due to the lack of a qualified rater or senior rater on station, your Regional Training Manager or the Chief, FAO Proponent, can serve as

rater/senior rater. In any case, your formal rating scheme must be identified and your POI and OER Support Form completed within the first 30 days after your arrival.

c. Duty title: DA Form 67-9, Part III, Block a, should read, “Foreign Area Officer”. You are a FAO trainee, not an assistant security assistance officer or attaché. Neither are you a translator or a liaison officer. ICT FAOs are not action officers; therefore you should not be used as a source of borrowed military manpower for your sponsoring organization. Any collateral duties assigned to you should be consistent with your availability to that organization and FAO ICT objectives. In no way should they take precedence over objectives stated in this guide and your approved POI.

d. Sample duty description.

Foreign Area Officer assigned to [organization], [country]. Develops and executes a Program of Instruction aimed at developing regional expertise in political, economic, cultural, and geographic dynamics. [Next line applies to those FAOs attending a host nation military course] Attends the [name and location of course]. Plans and conducts extensive orientation travel and visits throughout the region and produces cogent trip reports as a primary means of gaining this expertise. Manages an In-Country Training site, to include property, a site SOP, and historical files; manages and executes a budget of [dollar amount]. [As appropriate] In support of [organization] as required also performs duties as [any collateral duties].

CHAPTER 4

Standing Operating Procedures (SOP) Manual

1. Because no two FAO ICT sites are exactly alike, a local SOP is required for each station. In most cases, the SOPs already exist. However, where one does not exist or in the event of the opening of a new site, the incoming ICT FAO is responsible for producing an SOP. Upon reporting to a station, you should immediately become familiar with the SOPs contents and use it as a guide throughout the ICT period. During the tour, review and revise the document as needed. A new or substantially revised local SOP must be forwarded to DAMO-SSF for approval.

2. The SOP must be a detailed document to provide procedures and guidance for routine and contingency ICT-related operations. A SOP must contain, at a minimum, the following topics:

- a. Reference (DAMO-SSF MOI).
- b. Purpose of SOP.
- c. Scope.
- d. Organization of ICT site.
- e. Training.
 - (1) Objectives.
 - (2) Procedures.
 - (3) Reports.
- f. Administration.
 - (1) Office Procedures (minimize workload on supporting staff).
 - (2) Personnel Administration.
 - (a) Feeder Reports (as required).
 - (b) OER Rating Scheme and Procedures.
 - (c) Pay and Allowances (travel, housing, etc.).
 - (d) Sponsor Program.

- (e) In-processing.
 - (f) Out-processing.
- (3) Procedures for Visits by Regional ICT FAOs.
- (4) Budget.
 - (a) Preparation and Approval.
 - (b) Expenditure of Funds.
 - (c) Supply and Maintenance.
 - (1) ICASS Agreement.
 - (2) FAO Vehicle.
- (5) Property Accountability.
- (6) Services (medical, commissary, postal, etc).
- (7) Security Procedures.
- g. Evacuation Procedures.

CHAPTER 5

FAO REPORTS

1. During ICT, you will be required to submit several types of reports. Three of these, the Program of Instruction (POI), the Mid-Tour and the End of Tour Report are one-time only reports. The Trip, Monthly Obligation and Vehicle Maintenance reports are recurring reports. Sites with FAO vehicles are also required to produce the semi-annual Vehicle Maintenance Report and an annual SF 82 (Agency report of Motor Vehicle Data).

2. All reports should be routed through your rater/senior rater prior to forwarding them to your regional manager at DAMO-SSF and all should be **UNCLASSIFIED**. A brief discussion of the format and content of these reports follows. The mailing addresses for all reports sent to DAMO-SSF or the FAO Coordinator, DLI, are listed in Chapter 13.

a. POI. See Chapter 3 for specific instructions. The POI will be submitted to DAMO-SSF within the first 30 days of ICT.

b. Mid-Tour Report. The Mid-Tour Report will be submitted to DAMO-SSF half way through the ICT period in the same memorandum format as the POI. The Mid-Tour Report is a tool to review your progress, make adjustments to the POI and bring up major issues related to the ICT program. A copy of the Mid-Tour Report will also be sent to the FAO coordinator at DLI, Monterey, for inclusion in the FAO reference library.

c. End-of-Tour Report. The End-of-Tour Report will be submitted to DAMO-SSF prior to your departure from ICT. It is written in the same memorandum format as the POI and Mid-Tour reports. The End-of-Tour Report should focus on what you accomplished during ICT and recommendations for adjustments to the ICT program. A copy of the End-of-Tour Report will also be sent to the FAO coordinator at DLI, Monterey, for inclusion in the FAO reference library.

d. Trip Reports.

(1) Trip reports are required for all travel conducted with FAO Program training funds. They are written in memorandum format and should be routed through your normal rating chain to the appropriate Regional Program Manager in DAMO-SSF. Trip reports should neither be travel guides nor should they be catalogues of statistics that are readily available in reference books. Trip reports are an individual effort; FAOs traveling together may not submit a collective report.

(2) Trips are built around the eight FAO educational objectives and these should be the focus of your report.

(3) Trip reports are due to DAMO-SSF within 30 days of completion of the travel. A copy of the trip report will also be sent to the FAO coordinator at DLI, Monterey, for inclusion in the FAO reference library. As a courtesy, a copy of the trip report should be sent to all DAOs of visited countries. Either mail or email will do.

(4) Trip Reports should address personal observations, perceptions and analysis. While these reports are **analytical** in nature, they also contain information that will be helpful for future FAOs planning travels in this country/region.

(5) Trip Reports should include the following:

- (a) Purpose.
- (b) Objectives (as derived from the POI).
- (c) Itinerary.
- (d) Observations and Facts.
- (e) Analysis.
- (f) Conclusions/Recommendations.
- (g) Strip Map indicating major route of travel.

e. Monthly Budget Reports. You are required to submit a budget report to DAMO-SSF every month, to include copies of all TDY orders, claims, vouchers and receipts. The budget report for a given month is due by the last day of the month following the covered period. A pre-formatted report form is provided with the quarterly obligation authority memo sent by DAMO-SSF and should be locally reproduced. In the event the budget report cannot be sent in time to reach our office by the end of the month, **ONLY** the pre-formatted report summary should be faxed to DAMO-SSF.

f. Vehicle Reports. If your site is equipped with a FAO vehicle, you are required to submit several reports. You must report any unusual incidents/accidents to your regional manager ASAP.

(1) **Vehicle Maintenance Report.** This report verifies that maintenance inspections and services have been accomplished and communicates the overall status of the vehicle. Use the worksheet in the ICT Guide to complete all of the requirements for this report. The Vehicle maintenance Report is due with the semi-annual hand receipt update on **15 April** and **15 October**. The report must be completed by a qualified mechanic at your ICT site (e.g. embassy GSO mechanic or civilian garage with a proven

track record). You may fax or mail us the report at the same time you transmit your hand receipt.

(2) Annual Commercial Design Motor Vehicle Requirements Review Report (DA Form 1577). For this report all that you need to submit is the make and model of your vehicle, year, current odometer reading and a few other pieces of information. The data is due on **15 April** of each year. Your information is critical. Use the worksheet in the ICT Guide to complete all of the requirements for this report. All of the FAO vehicles are rolled up into one report that goes to the Tank-automotive and Armaments Command (TACOM) with our priorities for new vehicle purchases. Unless we have good info, it's hard to justify new vehicles. Money is tight and we have to make a good case that our fleet is old and heavily used.

(3) Federal Automotive Statistical Tool (FAST) Report. This report goes through TACOM to the Department of Energy and the General Services Administration to show how much the FAO program has been using the FAO vehicles and what costs the vehicles are incurring. This report is due on **15 October** of each year. Use the worksheet in the ICT Guide to complete all of the requirements for this report. Keep this log sheet in your vehicle and update it each month. At the end of the FY, you will have all of the data you need to crunch the final numbers and complete the report before faxing it in to DAMO-SSF.

3. Please remember these reports are essential to our communication and ability to serve both the ICT FAO and the Army. Also, many of these reports demonstrate your ability to communicate effectively - a crucial skill for FAOs.

FOREIGN AREA OFFICER VEHICLE PROGRAM
FAO Vehicle Maintenance and Status Report

Keep a separate worksheet for each vehicle at your location. This report must be faxed or mailed hard copy NLT **15 April and 15 October** to DAMO-SSF.

Vehicle Location (ICT Site) _____
VIN _____ Vehicle Make and Model _____ Odometer Reading _____

Date of last tune-up (every 12 months or every 10,000 miles, whichever comes first)

Safety inspection performed:

<p>Brakes:</p> <ul style="list-style-type: none"><input type="checkbox"/> Function test<input type="checkbox"/> Brake pedal free travel<input type="checkbox"/> Remove right drum, check speed lining for excessive wear, check wheel cylinder for leaks/deterioration; If problems are noted here, all drums will be inspected.<input type="checkbox"/> Check hydraulic lines for leaks; fill system as required.<input type="checkbox"/> Inspect brake disc and pads IAW manufacturer's recommendation. <p>Lights:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check all lights, signals, and reflectors.<input type="checkbox"/> Check alignment of headlights. <p>Instruments, Controls, and Warning Signals:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check all instruments, gauges, mirrors, switches, controls, and horns for proper operation or damage.	<p>Exhaust System:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check muffler, exhaust, and tailpipes connections for leaks. <p>Steering System:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check all steering system components for wear, alignment, and damage. <p>Safety Belts:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check all safety belts for wear and proper installation. <p>Tires:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check all tires for damage or wear. <p>Windshield Wipers, Washers, Glass, and Defrosters:</p> <ul style="list-style-type: none"><input type="checkbox"/> Check for proper operation, wear, and damage.
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General remarks on the condition of the vehicle:

Inspection performed by (print and sign) _____

FAO Signature: _____ Date: _____ Printed Name/Title: _____

Phone Number: _____ E-mail Address: _____

FOREIGN AREA OFFICER VEHICLE PROGRAM
Annual Commercial Design Motor Vehicle Requirements Review Report
(DA Form 1577)

Keep a separate work sheet for each vehicle at your location. This report must be faxed or mailed hard copy NLT **15 April** to DAMO-SSF.

Vehicle Location (ICT Site) _____

VIN _____

Make and Model of Vehicle (e.g. Toyota Land cruiser, Jeep Cherokee) _____

Type (must be one of these 3 categories: Sedan; Truck, Carryall 4x4 SUV; Truck, Carryall 4x2 SUV)

Year of Vehicle _____

Current Odometer Reading (in miles) _____

Give total numbers for the following:

Any vehicle additions in the past 12 months _____

Any vehicles currently due in _____

Any dispositions in the past 12 months _____

FAO Signature: _____ Date: _____

Printed Name/Title: _____

Phone Number: _____

E-mail Address: _____

FOREIGN AREA OFFICER VEHICLE PROGRAM
Federal Automotive Statistical Tool (FAST) Report

Keep a separate worksheet for each vehicle at your location. This report must be faxed or mailed hard copy NLT **15 October** to DAMO-SSF.

Vehicle Location (ICT Site) _____

VIN _____

Light Duty Vehicle Description: (You must pick one of the choices in parenthesis, if your vehicle does not match one of the given categories you must explain on a separate sheet)

Class (Sedan, SUV4x2 4 Dr, SUV4x4 4 Dr) _____

Model (Subcompact, Compact, Midsize, Large) _____

Fuel (Gas or Diesel) _____

FISCAL YEAR FAO VEHICLE STATUS TRACKING CHART

Month	Maintenance Cost (in USD)	Miles Traveled	Fuel Cost (in USD)	Gallons Fuel Used
Oct				
Nov				
Dec				
Jan				
Feb				
Mar				
April				
May				
June				
July				
August				
September				
FY Total				

FAO Signature: _____ Date: _____

Printed Name/Title: _____

Phone Number: _____

E-mail Address: _____

CHAPTER 6

FAO REGIONAL TRAVEL

1. Regional travel is intended to give FAOs first-hand experience and expertise within their Area of Concentration (AOC). You, in the process of developing your POI, will develop a comprehensive travel plan within existing time and funding constraints. The amount of regional travel FAOs get varies with each ICT site. In some ICT locations, FAOs do not attend host nation schools and the basis of their training is travel. In other locations, FAOs may be in school for the majority of the ICT period. Regardless of the situation, the key to building a successful travel plan is prioritization.
2. The enclosed tables establish country priorities for FAO ICT travel. For the purpose of this document, no attempt is made to differentiate among countries currently restricted from official travel. Prior to planning your travel, you should verify the current status of countries within your region.
3. Each region is divided into as many as four tiers in order to provide some prioritization. Each country should be evaluated for a visit based on the relative political importance to U.S. National Security interests, time/space/distance requirements, budget constraints and current political situation. The list is **NOT** provided as a specific order of merit since, for example, it may be financially smart to visit several countries in one trip to a geographic sub-region thus saving airfare. You must remember that stewardship of our scarce travel funds is critical to the success of the program. Don't visit a country just because it's in your region. You must have specific training objectives relative to each trip.
4. A few notes on the trips themselves:
 - a. Do your own preparation for travel, if possible, to include flight and hotel reservations, sending out country clearance requests and any other coordination that may be required. This not only helps you learn what it takes to make these trips happen, but also takes some of the burden off of the agencies that support you.
 - b. If you are traveling on Government funds, you must have country clearance for the countries you intend to visit. This also includes your spouse, if accompanying you. The DoD Foreign Clearance Guide (DoD 4500.54-G) contains all the information you need. A copy is available at all embassies or go to <http://www.fcg.pentagon.mil/>. Timelines for submission of country clearance requests vary so ensure you meet all requirements stipulated in the Foreign Clearance Guide. Include DAMO-SSF as an info addressee on your clearance request messages (HQDA WASHINGTON DC//DAMO-SSF//)
 - c. Always establish specific learning objectives for official travel. We recommend tracking issues throughout the region vice looking at new issues with each trip. When you send out a country clearance request, include your training objectives in

the message. This will give the people who approve your visit an idea of why you are coming, plus it shows them you have specific interests in their country.

d. Do your homework before you go. This is key to successful regional travel. Don't expect to be spoon-fed information. You'll need to be familiar with the country to be visited before you go. Know the questions to ask and the things to look for.

e. Pace yourself. Many FAOs try to pack too much into too short a period of time. Visiting four countries in eight days is probably too ambitious. The amount of time you'll have to spend in a country, to gain a real flavor for it, will vary greatly, depending on the size of the country and the transportation infrastructure. This goes back to the point of preparing before you depart. Ensure you consult with the DoD or Department of State (DoS) agency that will host your visit before you develop your itinerary and send your country clearance request.

f. Ensure the first stop you make in any country is at the U.S. Embassy or Consulate responsible for the area. You should arrange for briefings from the DAO, SAO, Political Officer, Economics Officer, Regional Security Officer and any other pertinent agency that will provide you a solid basis for the visit. Ask to schedule these meetings in your country clearance message and ask them to make suggestions on any other required/desired agencies to visit. Always check with the local RSO to verify the current Force Protection posture and any local security measures that are in effect.

g. Travel with your family, if possible. DAMO-SSF cannot fund family travel, however, with the FAO's costs paid, the cost of family travel is greatly reduced. Remember that, due to security classification or political sensitivity, it may not be appropriate for a family member to attend all briefings. Also, the inclusion of family members must not hinder or restrict ICT travel or objectives. FAO travel cannot be limited to major tourist areas and family members must be willing to "rough-it", if necessary.

h. Contact the ICT FAO resident in the country you are visiting, if one is assigned there, for assistance in making your itinerary, scheduling visits, determining availability of a FAO vehicle for use, and for making lodging arrangements. Networking with your fellow FAOs can lead to reduced travel costs and thus stretch your travel budget (see Chapter 7).

i. Quality trip reports are important. They provide an opportunity for you to synthesize your thoughts and impressions. They are *the* tool in developing your analytical and writing skills – both vital skills for FAOs. Trip reports also represent important historical data that is of great use to both FAOs training at DLI and future ICT FAOs in your country. Needless to say, they play an important role in your OER. Finally, CINCs and MACOM commanders are increasingly requesting to see these reports. Take pride in your work; do them right.

j. Considerations affecting travel prioritization. There is no requirement to visit all priority one countries before those in a lower category. Apply the intent of this guide and common sense. FAOs should consider a number of factors in developing a travel calendar, to include:

(1) Budget. Funding is insufficient to conduct unlimited travel. You must prioritize your travel and make use of cost-saving measures in order to maximize resources. Often, FAOs can save transportation funds by conducting extended trips to several countries in the same sub-region.

(2) Time. Twelve months is the optimal ICT tour length. To meet Army operational requirements and remain competitive for future promotions, it is imperative not to extend ICT merely for the purpose of extensive regional travel.

(3) Importance of each country to the U.S. and the role of that country in inter-regional affairs.

(4) Student's Background. Each officer's background, experience and projected follow-on assignment may affect individual travel needs and length of stay.

(5) Access. Countries listed in the travel plan should only include those for which the FAO reasonably expects to be granted clearance.

5. Remember that FAOs are **regional** experts. Officers who limit their regional travel to their country of assignment, or only visit the countries immediately adjacent to their ICT site, deprive themselves of the regional exposure they will need for future service.

Latin America (48B)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Argentina Brazil Chile Colombia Mexico	Bolivia Ecuador Guatemala Peru Venezuela	El Salvador Honduras Nicaragua Panama Paraguay Uruguay	Costa Rica Dominican Republic	Belize Caribbean Islands Easter Island French Guyana Galapagos Islands Guyana Malvinas Islands Patagonia Suriname Tierra del Fuego

Europe (48C)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Belgium Czech Republic France Germany Hungary Italy Poland United Kingdom	Austria Bosnia Croatia Greece Macedonia Netherlands Serbia	Bulgaria Denmark Finland Romania Slovakia Slovenia Spain Sweden	Albania Luxembourg Norway Portugal Switzerland	

South Asia (48D)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Bangladesh India Pakistan	Burma China (Tibet) Nepal Sri Lanka	Afghanistan Bhutan		Maldives

Eurasia (48E)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Russia Ukraine	Belarus Kazakhstan Turkmenistan Uzbekistan	Armenia Estonia Georgia Latvia Lithuania Moldova	Azerbaijan Kyrgyzstan Tajikistan	

China (48F)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
China Hong Kong Taiwan	Japan Korea Mongolia N.E. Russia Vietnam	Burma India Pakistan Singapore Thailand Vietnam	Indonesia Kazakhstan Kyrgyzstan Malaysia Philippines Tajikistan	

Middle East/North Africa (48G)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Egypt Greece* Israel Jordan Kuwait Saudi Arabia Syria Turkey	Bahrain Lebanon Morocco Qatar Tunisia United Arab Emirates	Mauritania Oman Yemen		Algeria Iran Iraq Libya Sudan

Northeast Asia (48H)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Japan Korea	China N.E. Russia Taiwan			

Southeast Asia (48I)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Indonesia Malaysia Philippines Singapore Thailand Vietnam	Burma Cambodia Laos	China Taiwan		

Sub-Saharan (48J)

Tier 1	Tier 2	Tier 3	Tier 4	Proponent Approval Required
Dem Rep of Congo Ethiopia Kenya Nigeria Senegal South Africa	Angola Botswana Cameroon Ghana Ivory Coast Mozambique Zimbabwe	Burkina-Faso Central African Republic Congo Mali Niger Tanzania Uganda Zambia	Burundi Chad Djibouti Eritrea Gambia Guinea Guinea-Bissau Madagascar Malawi Namibia Rwanda Somalia Togo/Benin	Liberia Sierra Leone

* Greece is a travel priority for Turkish 48Gs only.

CHAPTER 7

HOSTING VISITING FAOS

1. From time to time, FAO trainees from other countries in your region, and in some cases from other regions, will request to visit your country. Country visits are the backbone of regional orientation. Provide as much assistance and insight as you can to make the visits productive.
2. Ideally, you should sponsor the visiting FAO and take care of any arrangements that need to be made. This professional courtesy will enhance the visiting officer's experience and will be reciprocated when you conduct travel.
3. Whenever possible, traveling FAOs should make a country's capital, and the U.S. Embassy located there, their first stop in a country. The embassy visit helps to focus the FAO's time in country and the briefings they receive are an important piece of their research on the country. At a minimum, visiting FAOs should be scheduled for briefs with the DAO/SAO, the Economics and Political-Military sections and the Regional Security Office. Additionally, any host nation access you can arrange, such as unit or industry tours, will be greatly appreciated.
4. As the expert on your country, you will also likely be asked to assist in making hotel reservations or in directing the FAO to hotels at or below per diem rates. Your help with hotels and guiding the FAO to the important things to see in your country is critical in helping to hold down the costs of the FAO travel program.
5. If your site is so equipped, you should provide the FAO vehicle to a visiting FAO during his/her visit. This will greatly defray the costs on travel. FAO vehicles are provided largely for this purpose.

CHAPTER 8

FAO BUDGET

1. Purpose. The purpose of this chapter is to provide procedures and guidance on the management of the FAO budget during ICT.

2. Responsibilities.

a. FAO Proponent Team (DAMO-SSF). Provides definitive funding expenditure guidance and dollar limitations by program on a quarterly, sometimes monthly basis, and manages day-to-day issues related to obligation of these programmed funds by FAO trainees worldwide. In coordination with the U.S. Army Tank Automotive and Armaments Command (TACOM), DAMO-SSF allocates FAO vehicles and provides guidance on their use. In coordination with the Corps of Engineers, Washington, DC, DAMO-SSF approves government lease housing requests under \$20,000 per annum and manages government leased housing agreements pertaining to FAO trainees worldwide.

b. CDR, TACOM (AMSTA-LC-CJS), Warren, MI. Provides funding and shipment for FAO vehicle procurements.

c. Corps of Engineers (CE-HSC-HM), Washington, DC. Provides guidance concerning overseas government leased housing agreements. Prepares FAO lease packages and obtains Congressional approval for high cost leases (currently above \$20,000).

d. U.S. Army Field Support Center (USAFSC) Fort Meade, MD; U.S. Army Pacific Command (USARPAC), Fort Shafter, HI; Third U.S. Army (USARCENT), Fort McPherson, GA; U.S. Army FAO and Language Training Institute (FLTI); Garmisch, FRG. Provide personnel administrative support and program coordination activities with in-country FAO trainees IAW support agreements with DAMO-SSF.

e. U.S. Army Resource Services, Indianapolis, IN. Provides funding for ICASS. See Chapter 9.

3. Budget Programs. DAMO-SSF receives budget allotments for each fiscal year and provides appropriate obligation authority to each FAO ICT training site.

a. Program 323752: Funds training/travel expenses in fulfillment of FAO ICT objectives, FAO conferences, and related support services. Includes FAO vehicle maintenance, office supplies, equipment, and security guard services, when required.

b. Program 325795: Funds expenses and related services for official long distance telephone calls, postage, and base communications. Official phone calls related to PERSCOM, Ft. Meade, DAMO-SSF, and in-country training sites your station is visiting.

c. Program 194110: Funds government overseas leased housing expenses to include utility costs, interior and exterior maintenance expenses, limited housing furnishing in accordance with the Common Table of Allowances (CTA) 50-909, and minor alterations not provided by the landlord. DAMO-SSF does not fund such items as roof repair, concrete walkways, private fences, flower pots, house plants, china, silverware, linen, microwaves, toaster ovens, sheets, drapes, coffee pots, etc.

4. Budget Phases. The two distinct phases, which define the annual budget process applicable to FAO trainees, are outlined below:

a. Formulation Phase (May-July). During this period, DAMO-SSF provides guidance and other pertinent information related to estimating the dollar requirements for all FAO training programs for the next fiscal year (FY) (**Example A**). These estimates, by program, are required from each FAO training site. A funding estimate, which consolidates individual requirements, will be provided by the senior FAO in-country, where applicable. Estimated requirements are forwarded to DAMO-SSF to support the preparation of the overall FAO budget for the following FY. Please do not inflate your budget. If you or your predecessors have had to turn money back in at the end of the fiscal year, you may have over-budgeted. You can help DAMO-SSF manage increasingly limited resources by providing an accurate budget estimate. All anticipated expenses related to the ICT program should be included in this estimate. Use EOR codes to budget and account for expenses. These codes are the building blocks of all budgets and represent categories of expenses such as travel, supplies, equipment, postage, and communication. **Example B** provides several of the commonly used EOR codes.

b. Execution Phase. This phase includes the period of the budget appropriation i.e., 1 October - 30 September, for all FAO-related programs. In some cases, circumstances arise which require changes to a FAO's POI and program increases or decreases to support unprogrammed budget requirements. Requests for adjustments and increases/decreases to program ceilings must be forwarded to DAMO-SSF prior to obligation.

5. Budget Allowances. The FAO must request authorization from DAMO-SSF by submission of a written request with justification before purchasing items which will remain on station such as housing furniture/appliances, office equipment, etc. If there is any doubt about whether an item is authorized or not, you must contact DAMO-SSF before purchasing the item.

6. Budget Restrictions.

a. The following expenses are **NOT** funded by **FAO budgets**:

- (1) Transportation expenses between place of residence and place of duty.
- (2) Family travel expenses.

(3) Personal services, such as gardener, chauffeur and maid/housekeeping services.

(4) Internet connection fees.

(5) Personal items such as typewriters, cameras, cassette recorders, CD players, garden supplies, books, periodicals (local newspapers, the Army Times), office modular furniture, ammunition, awards, clocks, lawn furniture, clothing allowances, TV, VCR, vacuum cleaner, blenders, garden hose, lawn mower, tools, generator, telephone, ladder/step stool, shovels, shears, outdoor grills, patio furniture, vehicles, gifts, or other representational items, which are retained by the FAO for his/her personal use. The purchase of items that will remain on station, such as government leased housing furniture or office equipment, must be authorized by DAMO-SSF after submission of a request with justification.

(6) Personal conveniences such as taxis (except in conjunction with official travel, DD Form 1610), personal entertainment or recreation, cleaning of personally owned drapes and carpets, freight costs for personal items, shipment of household goods and personal vehicle, private postage or private telephones and petty cash.

(7) Travel on blanket travel orders is not authorized for FAOs.

7. Procedures for estimating travel requirements:

- a. Obtain actual transportation costs, e.g., air, rail, etc.
- b. Use the Joint Federal Travel Regulations (JFTR) to obtain per diem rates for each city/area to visit.
- c. Multiply appropriate per diem cost by number of days at location.
- d. Add 1 & 3 for travel estimate.
- e. To enhance travel opportunities, actual expenses can be reduced by lodging at hotels/motels less than maximum per diem rates or by staying with a fellow FAO.

8. Use of DA Form 3971, Advice of Obligation Authority.

a. Front Side

(1) DA Form 3971 is the primary document used to transfer both the obligation authority and legal liability for use of appropriate funds during specified time period. DAMO-SSF issues a DA Form 3971 each quarter (see **Examples C and D**) for each budget program applicable to the FAO training site. FAOs may not obligate funds after the expiration date of the advice/authority (Block 5) and may not obligate funds in excess of the total obligation authority of each program. Unused funds, however, will be carried

forward and included in the unobligated balance of the following quarter(s) until the end of the fiscal year. **Unobligated balance at end of the FY does not transfer to next FY.** In many instances, more than one funding advice is issued each quarter to reflect reprogramming of funds (increases/decreased to program ceilings). Although Block 5 will not change, the DA Form 3971 with the latest issue date (Block 2) will also change. For example, Advice Number FAO-1 indicates the original issue for the 1st Quarter, FY 01. Advice FAO-1A indicates the first amended advice for that quarter, FAO-1B, the second amended advice, and so on. FAOs are prohibited from making or authorizing an obligation in excess of the amount authorized for that program for that quarter, even if it is projected that additional funds would be authorized for the next quarter.

(2) The DA Form 3971 is used to delegate specified obligation authority from DAMO-SSF to the individual FAO/Senior FAO acting as the funds manager for the FAO training site. This authority cannot be further delegated.

(3) Funds cannot be transferred from one Element of Resource (EOR) to another EOR without authorizing approval from DAMO-SSF. Your travel EOR has a limitation target that restricts the amount of funding that can be used for travel (EORs 21T1 & 21T2). When this situation occurs, DAMO-SSF will notify each FAO training location by message, normally in the annual budget approval message. However, when these limitations do exist, any funding excess/shortage in travel will have to be coordinated with DAMO-SSF for approval and appropriate reprogramming.

(4) Although unobligated funds from one quarter are added to the subsequent quarter's program ceilings, they cannot, under any circumstances, be reprogrammed for use in the next FY.

(5) Funds authorized for use under one program cannot be switched to another program. For example, an excess of funds in P323752 may not be transferred into P194140 to cover an unexpected shortfall.

b. Reverse Side

(1) Another primary function of DA Form 3971 is to maintain a record of obligations incurred. To facilitate a monthly transmittal of obligation/expense documents, the reverse side of the DA Form 3971 has been modified into an "Obligation Record" which serves both as a transmittal document and summary of obligation. A monthly obligation record is required for each program for which funds have been authorized (**Examples C2, D2**). Negative reports are required.

(2) Obligations within each program are identified using the date the obligation occurred, the standard document number (assigned by the FAO funds manager for later reference in tracking the obligation/expense), its applicable EOR, the amount of the obligation (actual or estimated), the unobligated balance remaining, and remarks (a brief description of the purpose of the obligation).

(3) If actual obligations/expenses exceed previous month estimates, only the additional obligation need to be shown, together with reference to the earlier standard document number. A similar procedure is to be used to reflect actual obligations/expenses, which are less than obligations previously estimated. These adjustments are placed in parentheses. Documentation must always accompany any changes to the obligation.

(4) Each Obligation Record will be signed by the FAO/Senior FAO, dated, and forwarded with supporting obligation documents directly to DAMO-SSF. The monthly Obligation Record must be forwarded NLT COB on the last working day of the month following the report month or earlier if no further obligations are scheduled.

(5) Each obligation entry must be fully supported by documented evidence of the expense such as travel orders, settlement vouchers, and receipts that are annotated with the appropriate fund cite description. When receipts or other documented evidence are not available to support authorized expenditures, e.g., taxi fares; a certification must be attached to DD Form 2406, Miscellaneous Obligation Document (MOD). Both the MOD and attached certification must contain the same accounting classification, standard document number, and description of the obligation.

(6) The Department of State frequently uses SF 1080 to reimburse other fund cites.

(7) An explanation of accounting classification citations is in **Example G**. Each FAO should become familiar with these codes in order to account for obligations properly and monitor budget execution accurately. All obligation documents attached to the Monthly Obligation Record must contain complete accounting classifications.

9. Government Leased Housing.

a. DAMO-SSF has obtained authority from the Corps of Engineers to authorize obligation of funds for government overseas leased housing at FAO training locations where the cost falls below the Congressionally-imposed ceiling (currently \$20,000/year). This ceiling includes cost of the annual lease as well as utility and maintenance expenses related to the family housing unit. In those locations where leased housing is not provided, allowances are provided under the Overseas Housing Allowance (OHA) program.

b. DAMO-SSF manages and authorizes funds for government leased housing through the Advice of Obligation Authority process. Requests for approval of new government leased housing agreements under \$20,000 per annum can be approved by DAMO-SSF. Annual leases of \$20,000 and above must receive Congressional approval before the housing is occupied; such requests are directed to DAMO-SSF. Congressional approval requires 60-90 days; therefore, earliest possible submission of high cost government lease request is strongly encouraged.

c. All requests for new government leased housing must include the message for congressional notification of high cost lease approval at **Example E**. This message must be sent to DAMO-SSF.

(1) Type of currency and rate of exchange effective at the time of the application, as well as any known initial occupancy requirements must be included in the message.

(2) A brief statement from DATT/ARMA certifying the housing unit to be adequate and not ostentatious is also required. Rationale for selecting the unit should be included, e.g., security requirements.

(3) DAMO-SSF has the authority to provide family housing funds to offset anticipated start-up expenses, e.g., painting and upgrade of the quarters, purchase/replacement of furniture/appliances, etc. (not to exceed 25% of annual rent). Approval of furniture purchase and transportation at government expense are authorized normally in areas where the length of the FAO training tour and inability to obtain timely receipt of household goods shipments support such a determination. Requests for family housing funds should be forwarded to DAMO-SSF with documented substantiation of the requirement to include name of item along with cost.

(4) In general, FAO sites that anticipate a requirement for new government leased housing should contact DAMO-SSF as early as possible to obtain a clarification of current guidance and specific budgetary considerations.

10. Overseas Housing Allowance.

a. At most FAO training sites FAO trainees reside in private leased housing. At these locations, officers receive their full BAQ and Overseas Housing Allowance (OHA), which are determined by the Per Diem, Travel, and Travel Allowance Committee. OHA is similar to the Variable Housing Allowance (VHA) used in CONUS to provide a variable additional monthly allowance for housing expenses based on local costs. OHA also includes allowances for average utility and recurring maintenance costs as well as moving out expenses.

b. Requests for adjustments to the OHA should be directly submitted to the Per Diem Travel and Transportation Allowance Committee, Hoffman Bldg. #1, Room 836, 2461 Eisenhower Avenue, Alexandria, VA 22331-1300.

c. Requests for OHA are processed with the Finance and Accounting Office (F&AO) servicing the student. The F&AO will require the following information to process requests for OHA:

(1) Amount and type (foreign or U.S. currency) of rent.

(2) Utility costs (note whether included in rental expense).

- (3) Member is with or without dependents.
- (4) Member is legally separated or divorced and paying alimony and/or child support.
- (5) Member is sharing quarters with other service members and number of other service members.
- (6) Date of occupancy or change of privately leased quarters.
- (7) Copy of lease agreement (English translation).

11. The following example documents will help guide your through the process. Among other documents, we have provided examples of budget reports for one quarter, copies of travel orders, and vouchers covering the transfer of funds between agencies and reimbursement.

12. Any questions reference these procedures should be addressed to Ms. Patricia Jones, DAMO-SSF, DSN 227-6317, commercial (703) 697-6317.

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EXAMPLE A

SAMPLE MESSAGE TEXT – ANNUAL BUDGET CALL-UP (page 1)

SUBJECT: FY 2002 FOREIGN AREA OFFICER IN-COUNTRY TRAINING AND FAMILY HOUSING BUDGET ESTIMATES

1. FAO TRAINEES AT FAO LOCATIONS WILL ASSESS BUDGET REQUIREMENTS FOR FY2002 AND PROVIDE BUDGET PROJECTIONS TO THIS OFFICE NLT 13 JULY 2001. ALL PROJECTIONS SHOULD INCLUDE THE FOLLOWING:

A. P323752.40 - (FAO TRAINING ACCOUNT) ALL TDY/TRAVEL REQUIREMENTS OF ALL FAOS DUE IN COUNTRY DURING THE NEXT FISCAL YEAR, TO INCLUDE

- ALL REIMBURSABLE TDY SUPPORT PROVIDED THROUGH THE EMBASSY IN SUPPORT OF FAO REQUIREMENTS.
- FAO VEHICLE MAINTENANCE (THIS PROGRAM DOES NOT PURCHASE VEHICLES.
- OTHER REQUIREMENTS RELATED TO FAO MISSION (GENERAL OFFICE SUPPLIES.
- B. P325795.00 - ALL OFFICIAL TELEPHONE CALLS (COMMUNICATION) AND OFFICIAL MAIL (POSTAGE).
- C. P194140 - ALL FAO GOVERNMENT LEASED HOUSING RENT, UTILITY EXPENSE, MINOR REPAIRS AND MAINTENANCE MATERIALS, YOUR BASIC HOUSING FURNITURE, AND APPLIANCES.

2. FAOS ARE STRONGLY ENCOURAGED TO COORDINATE THEIR SUBMISSIONS WITH THEIR REGIONAL PROGRAM MANAGERS PRIOR TO RESPONDING TO THIS REQUEST. TRAVEL BUDGET REQUESTS MUST REFLECT A FEASIBLE PLAN THAT MEETS PROGRAM TRAINING PRIORITIES. SPECIFICALLY, ALL TRAVEL BUDGETS MUST REFLECT PRIORITY ONE AND TWO TRAVEL, PER THE FAO ICT GUIDE. BUDGETS SHOULD BE BASED ON A REASONABLE EXPECTATION OF THE TRAVEL, TIME AVAILABLE TO EACH SITE AND EACH FAO ON SITE. UNJUSTIFIED AND/OR UNUSUAL REQUIREMENTS WILL NOT BE BUDGETED.

3. THE PROPONENT MANAGES BUDGET EXECUTION BY FUNDING, BY ELEMENT OF RESOURCE (EOR). EOR IS SIMPLY DEFINED AS A CATEGORY OF EXPENSE BY OBJECT CLASS. EORS ARE NECESSARY FOR THE FY00 BUDGET ESTIMATES. NORMALLY, ONLY THE FIRST TWO CHARACTERS OF THE EOR CATEGORY ARE REQUIRED. PROVIDED BELOW ARE THE MOST FREQUENTLY USED CODES WITH ALL FOUR CHARACTERS.

PROGRAM: 323752.40
325795.00 (EOR 23 ONLY)
21T1 - TRAVEL EXPENSES (AIRLINE TICKET)
21T2 - PER DIEM AND OTHER EXPENSES
2311 - COMMUNICATION (OFFICIAL PHONE CALLS)
233Y - POSTAGE (OFFICIAL MAIL)
252G - CONTRACTUAL SERVICES AND OTHER PURCHASED SERVICE
26CB - GENERAL OFFICE SUPPLIES
26CA - REPAIR PARTS (FAO VEHICLE)
26CM - POL (DOMICILE TO DUTY SITES, GUATEMALA AND COLUMBIA ONLY)

PROGRAM 194140.00
231Z - LEASE
233B - UTILITY EXPENSE
252G - CONTRACTUAL SERVICE/REPAIR
26CB - SUPPLY/MAINTENANCE
31CA - HOUSING FURNITURE/APPLIANCES

SAMPLE MESSAGE – ANNUAL BUDGET CALL-UP (page 2)

4. USE THE FOLLOWING FORMAT FOR PROJECTIONS FUNDING PROGRAMS/EORS
APPLICABLE TO YOUR FAO LOCATION:

PROGRAM (323752.40) EOR 21, 25, 26
PROGRAM (325795.00) EOR 23 ONLY

EOR	PURPOSE	1 ST QTR	2 ND QTR	3 RD QTR	4 TH QTR	TOTAL
21	(TRAVEL)					

TRAVEL PLANS MUST LIST:

- A. COUNTRY OR COUNTRIES TO BE VISITED FOR EACH TRIP BY QUARTER;
NUMBER OF DAYS IN EACH COUNTRY
- B. NAME (S) OF OFFICER (S) CONDUCTING EACH TRIP
- C. PRIORITY OF EACH TRIP BY QUARTER (IF THREE TRIPS ARE PLANNED
IN A QUARTER, THERE IS A PRIORITY 1,2, & 3)
- D. ESTIMATED COST FOR EACH TRIP (DEPICT PER DIEM,
TRANSPORTATION, AND ADDITIONAL REIMBURSABLE EXPENSES CHECK JOINT
FEDERAL TRAVEL REGULATIONS (JFTR) AT YOUR STATION FOR EXPENSES)

EXAMPLE:

NAME	PLACE	DAYS	PRI	PER DIEM	TRANS	OTHER EX	TOTAL
CPT RAY	ITALY	7	1	1000	500	50	1550
MAJ FAES	GREECE	8	2	2000	1000	50	3050
CPT PATE	SPAIN	10	3	800	400	50	1250

23 (COMMUNICATIONS)
23 (POSTAGE)
25 (OFFICE CONTRACTUAL SVCS)
26 (OFFICE SUPPLIES)
26 (FAO VEHICLE MAINTENANCE / INSURANCE)

TOTALS

PROGRAM (194140)

EOR	PURPOSE	1 ST QTR	2 ND QTR	3 RD QTR	4 TH QTR	TOTAL
-----	---------	---------------------	---------------------	---------------------	---------------------	-------

23	(GOVERNMENT LEASE)					
23	(UTILITY EXPENSE)					
25	(HOUSING REPAIR SERVICES)					
26	(MAINTENANCE SUPPLIES AND MATERIALS)					
31	(HOUSING FURNITURE AND APPLIANCES)					

TOTALS

SAMPLE MESSAGE – ANNUAL BUDGET CALL-UP (page 3)

5. THE EORS MENTIONED IN PARAGRAPH 2 MAY NOT BE THE ONLY EXPENSE CATEGORIES REQUIRED BY YOUR LOCATION FOR ANY GIVEN FUNDING PROGRAM. IF YOUR REQUIREMENTS NECESSITATE USING OTHER EORS, INCLUDE THEM FOR DAMO-SSF REVIEW.

6. EVEN IF FY 2001 FUNDING LEVELS ARE ADEQUATE, EACH FAO LOCATION IS REQUIRED TO SUBMIT FY2002 PROJECTED REQUIREMENTS BY EOR.

7. FAOS MUST INVEST ENOUGH TIME TO ADEQUATELY CONSIDER AND PRESENT ALL FUNDING REQUIREMENTS FOR NEXT FY NOW SO THAT THIS OFFICE CAN ASSESS RESOURCE NEEDS AND IDENTIFY EARLY ADDITIONAL REQUIRED RESOURCES AS NECESSARY. BE SURE TO BUDGET FOR ALL NEW FAOS SCHEDULED TO ARRIVE AT YOUR STATION IN FY 2002. ALSO, AS APPROPRIATE, ENSURE ALL ANTICIPATED FURNISHINGS AND APPLIANCES ARE INCLUDED IN THE REQUEST.

8. BUDGET PROJECTIONS FOR THE INTERNATIONAL COOPERATIVE ADMINISTRATIVE SUPPORT SERVICES (ICASS) AGREEMENT SHOULD NOT BE INCLUDED IN THE FOREIGN AREA OFFICER PROGRAM BUDGET. RESOURCE SERVICE - INDIANAPOLIS, WILL SUPPORT THIS REQUIREMENT. PROVIDE A SIGNED COPY OF ICASS AGREEMENT TO U.S. ARMY RESOURCE-INDIANAPOLIS, ATTN: JDRS-I, COL 304V, 8899 EAST 56TH STREET, INDIANAPOLIS, INDIANA 46249-3005. THE POC FOR ICASS IS MS. SUSAN ROSE AT DSN: 699-2246, COMMERCIAL (317) 510-2246.

9. POC FOR FAO BUDGET IS MS. PATRICIA JONES, DSN: 227-6317, COMMERCIAL (703) 697-6317, FAX, DSN: 225-1658, COMMERCIAL (703) 695-1658.

EXAMPLE B
ELEMENTS OF RESOURCE (EOR)
(AR 37-100)

- 21T2 - PER DIEM
- 21T1 - TRAVEL EXPENSES THROUGH GTS OR LOCAL PAYMENT OF AIRLINES (LOPA)
- 21T2 - OTHER EXPENSES
- 231Z - RENTS/LEASES OTHER THAN GSA
- 2311 - PURCHASED COMMUNICATION
- 233B - PURCHASED UTILITIES (HEAT, LIGHT, SEWAGE DISPOSAL, ELECTRICITY, GAS, WATER, POWER)
- 233Y -- POSTAL SERVICE CHARGES
- 2339 - OTHER MISCELLANEOUS CHARGES
- 26CN -- OFFICE EQUIPMENT
- 252G -- OTHER PURCHASED SERVICES (CONTRACTUAL SERVICES)
- 26CB - GENERAL OFFICE SUPPLIES
- 26CA -- REPAIR PARTS/MAINTENANCE (OTHER THAN CONTRACTED)
- 26CM -- POL (FAO VEHICLE FOR OFFICIAL TRAVEL NOT FROM HOME TO DUTY)
- 31CA -- FURNITURE RECURRING EXPENSE

EXAMPLE C-1, SAMPLE ADVICE OF OBLIGATION AUTHORITY 1ST QTR,

ADVICE OF OBLIGATION AUTHORITY For use of this form, see AR 37-2; the proponent agency is Office of the Comptroller of the Army	1. ADVICE NUMBER FAO - 1	2. DATE ISSUED 23 October 2000																																																						
3. ISSUED TO SENIOR FAO CAMEROON	4. ISSUED BY HQDA, ODCSOPS (DAMO-SSF) 400 ARMY PENTAGON, RM 3B521 Washington, DC 20310-0400																																																							
<p>5. Authorization is granted to incur obligations until <u>30 September 2001</u> for the purposes and within the amount stated below. The funds requested have been reserved.</p> <p style="text-align: center;">Patricia A. Jones Budget Officer FAO Program Finance and Accounting Officer</p>																																																								
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8. AUTHORIZED PURPOSE AND DESCRIPTION <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Approp</u></th> <th style="text-align: left;"><u>Allot Serial</u></th> <th style="text-align: left;"><u>Project</u></th> <th style="text-align: left;"><u>EOR</u></th> <th style="text-align: left;"><u>Fiscal Station</u></th> <th style="text-align: left;"><u>APC Code</u></th> <th style="text-align: left;"><u>Standard Document#</u></th> <th style="text-align: right;"><u>Incr Decr</u></th> <th style="text-align: right;"><u>Total Amount</u></th> </tr> </thead> <tbody> <tr> <td>21 1 2020</td> <td>22-2010</td> <td>P323752.40000</td> <td>21</td> <td>S23185</td> <td>J3CY</td> <td></td> <td style="text-align: right;">\$ 933600</td> <td style="text-align: right;">\$ 10336.00</td> </tr> <tr> <td>21 1 2020</td> <td>22-2010</td> <td>P325795.00000</td> <td>2311</td> <td>S23185</td> <td>J3AC</td> <td></td> <td style="text-align: right;">150.00</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>233Y</td> <td></td> <td></td> <td></td> <td style="text-align: right;">50.00</td> <td></td> </tr> <tr> <td></td> <td></td> <td>P323752.40000</td> <td>252G</td> <td></td> <td></td> <td></td> <td style="text-align: right;">.00</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>26</td> <td></td> <td></td> <td></td> <td style="text-align: right;">800.00</td> <td></td> </tr> </tbody> </table> <p style="margin-top: 20px;">AUTHORIZED PURPOSES AND DESCRIPTION: Obligations for 1ST Quarter FY2001</p> <p><u>INSTRUCTIONS:</u></p> <ol style="list-style-type: none"> 1. <u>Cite complete accounting classification on all obligations and disbursement document.</u> 2. Maintain obligation record on reverse side of this form as a control to Preclude a possible violation of the Code 1517 (Over obligation). 3. Obligations incurred pursuant to this authority SHALL NOT EXCEED THE DOLLAR AMOUNT AUTHORIZED without prior written approval from DAMO-SSF. 4. At the close of each month, a copy of the DA Form 3971 with obligations listed and an obligation document attached for EACH obligation incurred will be promptly forwarded to DAMO-SSF. 5. NEGATIVE REPORTS WILL BE SUBMITTED. <p>* THIS ADVICE IS THE INITIAL ISSUANCE OF THE 1ST QUARTER.</p>			<u>Approp</u>	<u>Allot Serial</u>	<u>Project</u>	<u>EOR</u>	<u>Fiscal Station</u>	<u>APC Code</u>	<u>Standard Document#</u>	<u>Incr Decr</u>	<u>Total Amount</u>	21 1 2020	22-2010	P323752.40000	21	S23185	J3CY		\$ 933600	\$ 10336.00	21 1 2020	22-2010	P325795.00000	2311	S23185	J3AC		150.00					233Y				50.00				P323752.40000	252G				.00					26				800.00	
<u>Approp</u>	<u>Allot Serial</u>	<u>Project</u>	<u>EOR</u>	<u>Fiscal Station</u>	<u>APC Code</u>	<u>Standard Document#</u>	<u>Incr Decr</u>	<u>Total Amount</u>																																																
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			233Y				50.00																																																	
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			26				800.00																																																	

[illegible]

[illegible]

EXAMPLE C-4, SAMPLE ADVICE OF OBLIGATION AUTHORITY (2D QTR)

ADVICE OF OBLIGATION AUTHORITY For use of this form, see AR 37-2; the proponent agency is Office of the Comptroller of the Army	1. ADVICE NUMBER FAO - 2	2. DATE ISSUED 5 December 2000																																																															
3. ISSUED TO SENIOR FAO	4. ISSUED BY HQDA, ODCSOPS (DAMO-SSF) 400 ARMY PENTAGON, RM 3B521 Washington, DC 20310-0400																																																																
5. Authorization is granted to incur obligations until <u>30 September 2001</u> for the purposes and within the amount requested. The funds requested have been reserved. <div style="text-align: right; margin-right: 100px;"> Patricia A. Jones Budget Officer FAO Program Finance and Accounting Officer </div>																																																																	
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* THIS ADVICE IS THE INITIAL ISSUANCE OF THE 2nd QUARTER.																																																																	

EXAMPLE C-5, SAMPLE MONTHLY REPORT (DECEMBER)

TO: HQDA, ODCSOPS (DAMO-SSF)
400 ARMY PENTAGON
RM 3B521
WASHINGTON, DC 20310-0400

*AMOUNT OF *
*OBLIGATION *
*AUTHORITY *
* \$16,100.00 *

*****ACCOUNTING CLASSIFICATION*****
21 1 2020 22-2010 P323752.4000 S23185 J3
21 1 2020 22-2010 P325795.0000 S23185 J3AC

OBLIGATIONS FOR Dec FY2001

DATE * SDN# * EOR * OBLIG * AVAIL BAL * DESCRIPTION *

AVAIL BAL

2059.35

		21T11/21T2		1955.00	
		21T1/21T2		6000.00	2 nd Qtr Advice FAO-2
		21T1/21T2		7955.00	
11/18/00	HES8679B003DC	21T1/21T2	2300.00	5655.00	Heston tvl to Germany
		2311		24.75	
		2311		200.00	2 nd Qtr Advice FAO-2
		2311		224.75	
11/17/00	PHN01BJ30002BC	2311	121.00	103.75	Official phone call
11/19/00		252G		43.40	
		26		36.20	
		26		600.00	2 nd Qtr Advice FAO-2
				636.20	
11/21/00	VEH01BJ30001EC	26CA	397.80	238.40	FAO vehicle repair

D-1, SAMPLE ADVICE OF OBLIGATION AUTHORITY (1ST QTR)

ADVICE OF OBLIGATION AUTHORITY For use of this form, see AR 37-2; the proponent agency is Office of the Comptroller of the Army	1. ADVICE NUMBER <p style="text-align: center;">FHP-1</p>	2. DATE ISSUED <p style="text-align: center;">12 October 2000</p>																																													
3. ISSUED TO <p style="text-align: center;">SENIOR FAO BOTSWANA</p>	4. ISSUED BY <p style="text-align: center;">HQDA, ODCSOPS (DAMO-SSF) 400 ARMY PENTAGON, RM 3B521 Washington, DC 20310-0400</p>																																														
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<u>Approp</u>	<u>Allot</u> <u>Serial</u>	<u>Project</u>	<u>EOR</u>	<u>Fiscal</u> <u>Station</u>	<u>APC</u> <u>Code</u>	<u>Standard</u> <u>Document#</u>	<u>Incr</u> <u>Decr</u>	<u>Total</u> <u>Amount</u>																																							
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D-2, SAMPLE MONTHLY REPORT (DECEMBER)

TO: HQDA, ODCSOPS (DAMO-SSF)
400 ARMY PENTAGON
RM 3B521
WASHINGTON, DC 20310-0400

 *AMOUNT OF *
 *OBLIGATION *
 *AUTHORITY *
 * \$13,700.00 *

*****ACCOUNTING CLASSIFICATION*****
21 1 0702 22-3077 P194140.00 S23185 J3EX

OBLIGATIONS FOR OCT FY2001

[illegible]

***** AVAIL BAL *****

AVAIL BAL

\$13,700.00

[illegible]

EXAMPLE E

SUBJECT: REQUEST FOR STATE DEPARTMENT HIGH COST LEASE APPROVAL FOR FAO
QUARTERS

A. UR 241628Z AUG 00

1. THIS OFFICE WILL REQUIRE THE FOLLOWING ADDITIONAL INFORMATION FOR HIGH-COST LEASE APPROVAL IN DAKAR, SENEGAL.

A. POSITION: NORMANLLY ASSIGNED TO UNIT: ARMY FOREIGN AREA OFFICER
(FAO)

B. NORMAL GRADE FOR POSITIONS:

C. INTENDED INCUMBENT:

- ```

- 1. NAME
- 2. GRADE:
- 3. END OF TOUR
- 4. ORGANIZATIONAL ASSIGNMENT:
- 5. DUTY STATION:
- 6. DEPENDENTS (OTHER THAN SPOUSE):
- 6B: SEX: MALE (AGE), FEMALE (AGE)

```

D. EXECUTIVE AGENT FOR LEASE:

E. REASON FOR LEAVING:

OTHER: UPON COMPLETION OF IN-COUNTRY TRAINING, NEW FAO TRAINEE  
WILL REPLACE OFFICER - UNDERLAP IS MINIMIZED.

F. PROPERTY TO BE LEASED:

G. DESCRIPTION:

- 1. GROSS SQUARE FEET:  
- 2. NET SQUARE FEET:  
- 3. NUMBER OF BEDROOMS:  
- 4. NUMBER OF FULL BATHS:  
- 5. NUMBER OF HALF BATHS:  
- 6. DETACHED: ( ) HIGHRISE: ( ) DEPLEX'D: ( )

H. DISTANCE FROM NORMAL WORK SITE:

- 1. MILES:
- 2. MINUTES:

I. LEASE TERMS:

- 1. FROM / / TO / /
- 2. OPTION TO RENEW LEASE (YES / NO):

J. COSTS:

- |   |    |                                                               |    |
|---|----|---------------------------------------------------------------|----|
| - | 1. | BASIC RENT                                                    | \$ |
| - | 2. | ESTIMATED UTILITIES                                           | \$ |
| - | 3. | ESTIMATED MAINTENANCE                                         | \$ |
| - | 4. | OTHER COSTS                                                   | \$ |
| - | 5. | TOTAL COSTS                                                   | \$ |
| - | 6. | ARE THERE PROVISIONS FOR AUTOMATIC COST INCREASES? (YES / NO) |    |
| - | 7. | INITIAL GET READY COSTS                                       | \$ |

SAMPLE MESSAGE, HIGH COST LEASE APPROVAL (page 2)

K. CERTIFICATION OF APPROPRIATIONS AND COMPARABILITY: THIS IS TO CERTIFY THAT I HAVE PERSONALLY DETERMINED THAT THE LEASED QUARTERS INTENDED FOR OCCUPANCY BY ( ) ARE NEITHER OSTENTATIOUS NOR TOO LARGE AND THAT THIS DETERMINATION HAS BEEN CONFIRMED BY ( ), ADMINISTRATIVE OFFICER, AMERICAN OFFICER. ALSO, I HAVE DETERMINED THAT THESE (1) THESE QUARTERS WILL BE COMPARABLE IN SIZE AND COST TO THOSE OCCUPIED BY EMBASSY PERSONNEL OF EQUAL OR SIMILAR STATUS, AND (2) (INITIAL) (RECURRING) ADVANCE RENTAL FOR ( ) MONTHS (IS) (NOT) REQUIRED BY (LAW) (CUSTOM) OF THE COUNTRY.

2. YOUR IMMEDIATE ATTENTION TO THE REQUEST IS GREATLY APPRECIATED.

3. POC AT DAMO-SSF IS MS. PATRICIA JONES, DSN 227-6317, COMMERCIAL (703) 697-6317. REGARDS FROM THE FAO PROPONENT.

## EXAMPLE F: STANDARD DOCUMENT NUMBERS

1. This Section spells out procedures for the use of Standard Document Numbers.
2. The intent of the revised Standard Document Number (SDN) is to achieve consistency, ensure effective and efficient processing, improve audit trails, and for use as a control aid to identify obligation documents.
3. This standard document structure is applicable to all financial transactions for the FAO program. Each location will be responsible to keep a control log for each element of resource (EOR).
4. Each EOR has a separate SDN sequence. A sample of a standard document number is constructed below. The major change is that all SDN's consist of 14 digits.

| <u>Data Field Position Number</u> | <u>Data Field Description</u>               |
|-----------------------------------|---------------------------------------------|
| 1-3                               | First three letters of traveler's last name |
| 4-7                               | Last four numbers of traveler's SSN         |
| 8                                 | Type of travel (see table on next page)     |
| 9                                 | Calendar month                              |
| 10-12                             | Unique sequential travel order number       |
| 12-14                             | Country Code                                |

### **A. Travel** (EOR 23).

(1). If two or more FAO's are in one country, and both FAO's go on travel in the same month the SDN based on the data field on page 1 should be constructed as follows:

MAJ MAC HESTON  
SSN: 258-12-8679

COL CHARLES DOROSKI  
SSN: 978-56-4321

HES8679TA001DC

traveler's name      ↗ ↗ ↗ ↗ ↗  
traveler's SSN      ↗ ↗ ↗ ↗  
type of travel (T)      ↗  
calendar month      ↗  
sequential number      ↗  
country code      ↗

DOR4321TA002DC

traveler's name      ↗ ↗ ↗ ↗ ↗  
traveler's SSN      ↗ ↗ ↗ ↗  
type of travel (T)      ↗  
calendar month      ↗  
sequential number      ↗  
country code      ↗

(2) Country codes will always be a two (2) digit alpha character. A list of codes by country and accounting processing code (APC) is attached (Encl 2).

(3) The alphabetic month conversion chart will be used with calendar month below:

#### Calendar Month Alpha Conversion Chart

| JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| D   | E   | F   | G   | H   | J   | K   | L   | M   | A   | B   | C   |

(4) If a FAO travels in November the standard document number will be constructed as follows:

HES8679TB003DC

traveler's name    ↗ ↗ ↗ ↗ ↗

traveler's SSN    ↗ ↗ ↗ ↗ ↗

type of travel (T)    ↗ ↗ ↗ ↗ ↗

calendar month    ↗ ↗ ↗ ↗ ↗

sequential number    ↗ ↗ ↗ ↗ ↗

country code    ↗ ↗ ↗ ↗ ↗

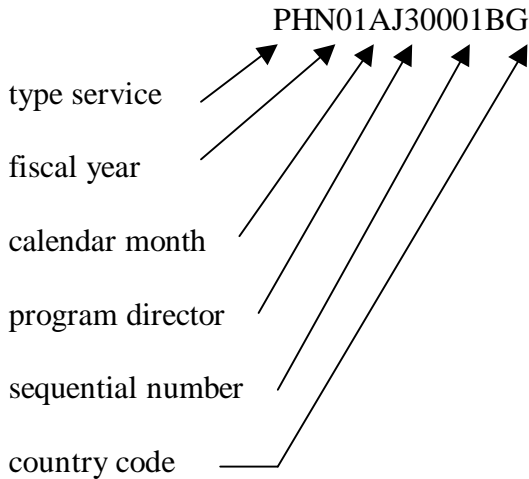
(5) The only change in the standard document number should be the calendar month and the sequential number. The calendar month is **B** because the travel took place in November. The sequential number changed to **003** and **004** because of the 3rd and 4th travel taken in FY97 (Encl 1C&1D).



**B. Communication** (EOR 23)

| <u>Data Field Position Number</u> | <u>Data Field Description</u> |
|-----------------------------------|-------------------------------|
| 1-3                               | Type service                  |
| 4-6                               | Fiscal year                   |
| 6                                 | Calendar month                |
| 7-8                               | Program director              |
| 9-12                              | Sequential number             |
| 13-14                             | Country Code                  |

A sample standard document number for communication (telephone bills) is provided below.

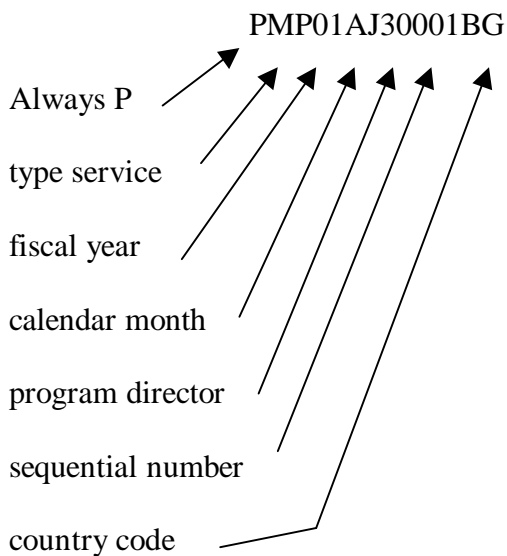


- (1) Country code will always be a two (2) digit alpha character (Encl 2).
- (2) Program director code for the FAO and PEP programs is always J3.
- (3) The alphabetic month conversion chart will be used with calendar month (para 6 (C)).

**C. POSTAGE** (EOR 23) SDNs will be constructed as follows:

| <u>Data Field Position Number</u> | <u>Data Field Description</u>                                                                                          |
|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| 1                                 | Always "P"                                                                                                             |
| 2-3                               | One of these two digit codes for type of service<br>UP - United Parcel<br>MP - Metered Postage<br>FE - Federal Express |
| 4-5                               | Fiscal year                                                                                                            |
| 6                                 | Calendar month                                                                                                         |
| 7-8                               | Program director                                                                                                       |
| 9-12                              | Sequential number                                                                                                      |
| 13-14                             | Country code                                                                                                           |

A sample of standard document number for postage is provided below:



**D. SUPPLIES** (EOR 26) **and EQUIPMENT** (EOR 31) SDNs will be constructed as follows:

| <u>Data Field Position Number</u> | <u>Data Field Description</u> |
|-----------------------------------|-------------------------------|
| 1-3                               | Type service                  |
| 4-5                               | Fiscal year                   |
| 6                                 | Calendar month                |
| 7-8                               | Program director              |
| 9-12                              | Sequential number             |
| 13-14                             | Country code                  |

A sample standard document number for supplies and equipment is provided below.

SUP01AJ30001BG

type service  
fiscal year  
calendar month  
program director  
sequential number  
country code

EQU01AJ30001BG

type service  
fiscal year  
calendar month  
program director  
sequential number  
country code

**E. LEASE, UTILITIES** (P19) (electric, gas, water) SDNs will be constructed as follows:

| <u>Data Field Position Number</u> | <u>Data Field Description</u>                             |
|-----------------------------------|-----------------------------------------------------------|
| 1-3                               | Type service: e.g. REN, ELC, GAS, WTR, FUM, TRS, PNT, FRN |
| 4-5                               | Fiscal year                                               |
| 6                                 | Calendar month                                            |
| 7-8                               | Program director                                          |
| 9-12                              | Sequential number                                         |
| 13-14                             | Country code                                              |

A sample of standard document number for rent and utilities (EOR 23) is provided below:

REN01AJ30001BG

type service → R  
fiscal year → E  
calendar month → N  
program director → 01  
sequential number → A  
country code → J30001BG

ELC01AJ30002BG

type service → E  
fiscal year → L  
calendar month → C  
program director → 01  
sequential number → A  
country code → J30002BG

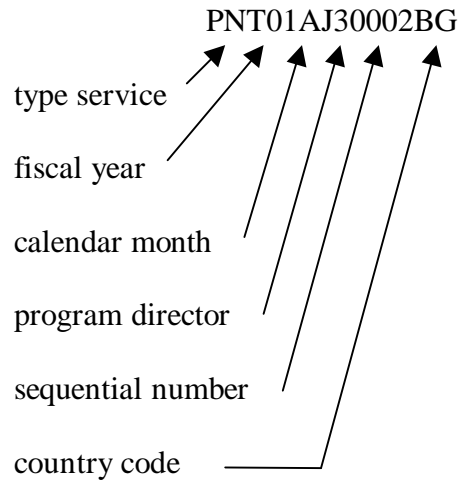
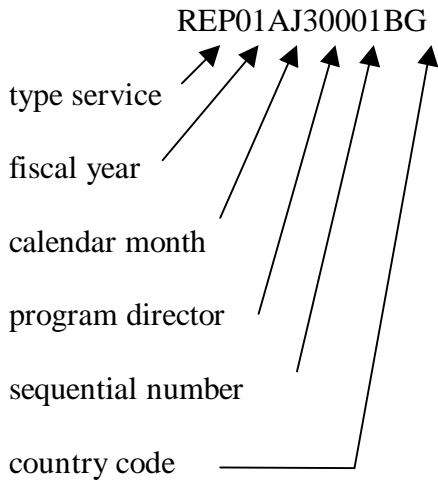
WTR01AJ300003BG

type service → W  
fiscal year → T  
calendar month → R  
program director → 01  
sequential number → A  
country code → J300003BG

GAS01AJ30004BG

type service → G  
fiscal year → A  
calendar month → S  
program director → 01  
sequential number → A  
country code → J30004BG

**E. REPAIR and PAINTING** (EOR 26) SDN is the same data field position number in item 10 above. SDN will be constructed as follows:



**G. FURNITURE and APPLIANCES** (EOR 31) SDN is the same data field position in item 10. SDN will be constructed as follows:

FRN01AJ30001BG

The diagram illustrates the structure of the SDN code FRN01AJ30001BG. It consists of 11 characters. The first character 'F' represents the type service. The next two characters 'R' and 'N' represent the fiscal year. The next two characters 'A' and 'J' represent the calendar month. The next four characters '3', '0', '0', and '0' represent the program director. The next two characters '1' and 'B' represent the sequential number. The final character 'G' represents the country code. Arrows point from each label to its corresponding character or group of characters in the code.

type service

fiscal year

calendar month

program director

sequential number

country code

APP01AJ30002BG

The diagram illustrates the structure of the SDN code APP01AJ30002BG. It consists of 11 characters. The first character 'A' represents the type service. The next two characters 'P' and 'P' represent the fiscal year. The next two characters 'A' and 'J' represent the calendar month. The next four characters '3', '0', '0', and '0' represent the program director. The next two characters '2' and 'B' represent the sequential number. The final character 'G' represents the country code. Arrows point from each label to its corresponding character or group of characters in the code.

type service

fiscal year

calendar month

program director

sequential number

country code

**EXAMPLE G**  
**Army Accounting Classification Fund Citation**

An example of a completed Army Accounting classification/fund Citation is provided and defined below:

| APPROP           | ALLOT<br>SERIAL | PROJECT/AMS<br>CODE/EOR   | FISCAL<br>STATION | APC<br>CODE | CNTRY<br>CODE | STD DOC NO.           |
|------------------|-----------------|---------------------------|-------------------|-------------|---------------|-----------------------|
| <u>21 1 2020</u> | <u>22-2010</u>  | <u>P323752.40000-21T1</u> | <u>S223185</u>    | <u>J3BW</u> | <u>BW</u>     | <u>MAR5678TA001BC</u> |
| A B C            | D E             | F G                       | H                 | I           | J             | K                     |
| 21 1 2020        | 22-2010         | P325795.00000-21T1        | S23185            | J3AC        | BW            | PHN01AJ30001BW        |
| 21 1 0702        | 22-3077         | P194140.00000             | S23185            | J3EX        | BW            | REN01AJ30001BW        |

- A. Code 21 identifies the Department of the Army as the funding entity.
- B. The fiscal year in which the fund authorization was issued in the example FY01.
- C. Fund appropriation and purpose, in this case Operations and Maintenance, Army (OMA).
- D. Operating agency; in this case Resource Services Washington.
- E. Allotment receiving the funds; this code represents FAO training program managed by DAMO-SSF.
- F. These 11 digits reflect the Army Management Structure, which interrelates program budgeting, accounting, and manpower control in a standard classification of Army activities and functions.
- G. Element of Resource (EOR). This code Further defines the expense; in this case, 21T1 refers to per diem expenses.
- H. Fiscal station account holder; in this case, HQDA, which handles all FAO transactions.
- I. The account holder determines the APC code to accurately record obligations and expenditures against the proper fund cite.
- J. Represents the Country Code. This example is Gaborone/Botswana.

K. Identifies the advice number (DA Form 3971) issued by the fund issuing authority. Normally, advices are issued monthly or quarterly, and numbered sequentially in the fund year, e.g., FAO-1, FAO-2, FAO-3. FAO-4. Amended advices are also number sequentially by quarters, e.g., FAO-1A, FAO-1B to reflect the first and second amendments (actually the second and third advices). Amended advices supersede all previous advices for that quarter. Only the latest advice by its date of issue (Block 2, DA Form 3971) will be used in submitting the monthly obligation record.



# EXAMPLE H-1, DD Form 1610

| REQUEST AND AUTHORIZATION FOR TDY TRAVEL OF DOD PERSONNEL<br>(Reference: Joint Travel Regulations)<br>Travel Authorized as Indicated in Items 2 through 21.                                                                                                                                                                                                                                                                                                                                                                     |                                         |                                   |                                                                                      | 1. DATE OF REQUEST                                  |                                        |      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------|------|
| REQUEST FOR OFFICIAL TRAVEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 2. NAME (Last, First, Middle Initial)<br>HESTON, MC DONALD 258-12-8679                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                         |                                   | 3. POSITION TITLE AND GRADE OR RATING<br>FAO PROGRAM TRAINING MANAGER<br>MAJ         |                                                     |                                        |      |
| 4. OFFICIAL STATION<br>HQDA, ODCSOPS<br>400 ARMY PENTAGON, WASH, DC 20310-0400                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |                                   | 5. ORGANIZATIONAL ELEMENT<br>DAMO-SSF                                                |                                                     | 6. PHONE NO.<br>703 697-6927           |      |
| 7. TYPE OF ORDERS<br>TDY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | 8. SECURITY CLEARANCE<br>TS       |                                                                                      | 9. PURPOSE OF TDY<br>TO SURVEY SUB-SAHARA FAO SITES |                                        |      |
| 10a. APPROX. NO. OF DAYS OF TDY (Including travel time)<br>5                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         | b. PROCEED ON (Date)<br>14 OCT 01 |                                                                                      |                                                     |                                        |      |
| 11. ITINERARY <input checked="" type="checkbox"/> VARIATION AUTHORIZED<br>FROM WASHINGTON DULLES INTERNATIONAL TO YAOUNDE, CAMEROON AND RETURN                                                                                                                                                                                                                                                                                                                                                                                  |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 12. MODE OF TRANSPORTATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |                                   |                                                                                      |                                                     |                                        |      |
| COMMERCIAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |                                   | GOVERNMENT                                                                           |                                                     | PRIVATELY OWNED CONVEYANCE (Check one) |      |
| RAIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | AIR <input checked="" type="checkbox"/> | BUS                               | SHIP                                                                                 | AIR                                                 | VEHICLE                                | SHIP |
| <input type="checkbox"/> AS DETERMINED BY APPROPRIATE TRANSPORTATION OFFICER (Overseas Travel only)                                                                                                                                                                                                                                                                                                                                                                                                                             |                                         |                                   | <input type="checkbox"/> MORE ADVANTAGEOUS TO GOVERNMENT                             |                                                     |                                        |      |
| <input type="checkbox"/> MILEAGE REIMBURSEMENT AND PER DIEM LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER TRANSPORTATION & RELATED PER DIEM AS DETERMINED IN JTR. TRAVEL TIME LIMITED AS INDICATED IN JTR.                                                                                                                                                                                                                                                                                                                     |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 13. <input checked="" type="checkbox"/> PER DIEM AUTHORIZED IN ACCORDANCE WITH JTR.<br><input type="checkbox"/> OTHER RATE OF PER DIEM (Specify)                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 14. ESTIMATED COST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |                                   |                                                                                      |                                                     |                                        |      |
| PER DIEM<br>\$ 1,515.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         | TRAVEL<br>\$ 980.00               |                                                                                      | OTHER<br>\$ 100.00                                  |                                        |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                                   |                                                                                      | TOTAL<br>\$ 2,595.00                                |                                        |      |
| 15. ADVANCE AUTHORIZED<br>\$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 16. REMARKS (Use this space for special requirements, leave, superior or 1st-class accommodations excess baggage, registration fees, etc.)<br>TRAVEL MEETS CRITERIA OF SECDEF MEMO 18 JUNE 82, TRAVEL BY GOV'T OFFICIALS INCLUDING FOREIGN TRAVEL. DD FORM 1351-2 WILL BE SUBMITTED TO F&AO WITHIN 7 DAYS AFTER TRAVEL IS COMPLETED. INDIVIDUAL AUTHORIZED TRAVEL BY RAIL, BUS, AND TAXI AND REIMBURSEMENT FOR CONFERENCE FEES AND OFFICIAL PHONE CALLS. COPIES OF ORDERS AND SETTLEMENT VOUCHERS WILL BE PROVIDED TO DAMO-SSF. |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 17. REQUESTING OFFICIAL (Title and signature)<br>McDonald, Heston MAJ, GS, FAO program Trng. Mgr                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                   | 18. APPROVING OFFICIAL (Title and signature)<br>John S. Brown, COL Executive Officer |                                                     |                                        |      |
| AUTHORIZATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 19. ACCOUNTING CITATION<br>21 1 2020 22-2010 P323752.40000 SDN# HES8679TA001DC S23185 J3AB 21T1/\$980.00 /21T2 \$1615.00                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                   |                                                                                      |                                                     |                                        |      |
| 20. ORDER AUTHORIZING OFFICIAL (Title and signature) OR AUTHENTICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                         |                                   |                                                                                      | 21. DATE ISSUED                                     |                                        |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                                   |                                                                                      | 22. TRAVEL ORDER NUMBER                             |                                        |      |

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# EXAMPLE H-2, DD Form 1610

| REQUEST AND AUTHORIZATION FOR TDY TRAVEL OF DOD PERSONNEL<br>(Reference: Joint Travel Regulations)<br>Travel Authorized as Indicated in Items 21 through 21.                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                   |      |                                                                                                 |         | 1. DATE OF REQUEST           |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------|------|-------------------------------------------------------------------------------------------------|---------|------------------------------|--|------------|--|--|------|-----|-----|------|-----|---------|------|--|-------------------------------------|--|--|--|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| REQUEST FOR OFFICIAL TRAVEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 2. NAME (Last, First, Middle Initial)<br>DOROSKI, CHARLES F. 978-56-4321                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     |                                   |      | 3. POSITION TITLE AND GRADE OR RATING<br>CHIEF, FOREIGN AREA OFFICER PROPONENT<br>DIVISION, COL |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 4. OFFICIAL STATION<br>HQDA, ODCSOPS<br>400 ARMY PENTAGON, WASH, DC 20310-0400                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                     |                                   |      | 5. ORGANIZATIONAL ELEMENT<br>DAMO-SSF                                                           |         | 6. PHONE NO.<br>703 697-3600 |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 7. TYPE OF ORDERS<br>TDY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | 8. SECURITY CLEARANCE<br>TS       |      | 9. PURPOSE OF TDY<br>FAO VEHICLE SURVEY                                                         |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 10a. APPROX NO. OF DAYS OF TDY (Including travel time)<br>5                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | b. PROCEED ON (Date)<br>24 OCT 01 |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 11. ITINERARY <input checked="" type="checkbox"/> VARIATION AUTHORIZED<br>FROM WASHINGTON DULLES INTERNATIONAL TO COLUMBIA, BRAZIL, GUATEMALA, VENEZUELA, AND RETURN                                                                                                                                                                                                                                                                                                                                                             |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 12. MODE OF TRANSPORTATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| <table border="1"> <thead> <tr> <th colspan="4">COMMERCIAL</th> <th colspan="3">GOVERNMENT</th> </tr> <tr> <th>RAIL</th> <th>AIR</th> <th>BUS</th> <th>SHIP</th> <th>AIR</th> <th>VEHICLE</th> <th>SHIP</th> </tr> </thead> <tbody> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>                                                                                                                                                        |                                     |                                   |      | COMMERCIAL                                                                                      |         |                              |  | GOVERNMENT |  |  | RAIL | AIR | BUS | SHIP | AIR | VEHICLE | SHIP |  | <input checked="" type="checkbox"/> |  |  |  |  |  | PRIVATELY OWNED CONVEYANCE (Check one)<br><input type="checkbox"/> MORE ADVANTAGEOUS TO GOVERNMENT<br><input type="checkbox"/> MILEAGE REIMBURSEMENT AND PER DIEM LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER TRANSPORTATION & RELATED PER DIEM AS DETERMINED IN JTR. TRAVEL TIME LIMITED AS INDICATED IN JTR. |  |  |  |
| COMMERCIAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |                                   |      | GOVERNMENT                                                                                      |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| RAIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | AIR                                 | BUS                               | SHIP | AIR                                                                                             | VEHICLE | SHIP                         |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| <input type="checkbox"/> AS DETERMINED BY APPROPRIATE TRANSPORTATION OFFICER (Overseas Travel only)                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 13. <input checked="" type="checkbox"/> PER DIEM AUTHORIZED IN ACCORDANCE WITH JTR.<br><input type="checkbox"/> OTHER RATE OF PER DIEM (Specify)                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 14. ESTIMATED COST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| PER DIEM<br>\$ 2,550.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | TRAVEL<br>\$ 1,750.00             |      | OTHER<br>\$ 150.00                                                                              |         | TOTAL<br>\$ 25,954,450.00    |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 15. ADVANCE AUTHORIZED<br>\$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 16. REMARKS (Use this space for special requirements, leave, superior or 1st-class accommodations, excess baggage, registration fees, etc.)<br>TRAVEL MEETS CRITERIA OF SECDEF MEMO 18 JUNE 82, TRAVEL BY GOV'T OFFICIALS INCLUDING FOREIGN TRAVEL. DD FORM 1351-2 WILL BE SUBMITTED TO F&AO WITHIN 7 DAYS AFTER TRAVEL IS COMPLETED. INDIVIDUAL AUTHORIZED TRAVEL BY RAIL, BUS, AND TAXI AND REIMBURSEMENT FOR CONFERENCE FEES AND OFFICIAL PHONE CALLS. COPIES OF ORDERS AND SETTLEMENT VOUCHERS WILL BE PROVIDED TO DAMO-SSF. |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 17. REQUESTING OFFICIAL (Title and signature)<br>CHARLES F. DOROSKI, COL, GS, CHIEF, FAO DIV                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                   |      | 18. APPROVING OFFICIAL (Title and signature)<br>JOHN S. BROWN, COL EXECUTIVE OFFICER            |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| AUTHORIZATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 19. ACCOUNTING CITATION<br>21 1 2020 22-2010 P323752.40000 SDN# DOR4321TA002DC S23185 J3AB 21T1/\$1750.00 /21T2 \$2700.00                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                   |      |                                                                                                 |         |                              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
| 20. ORDER AUTHORIZING OFFICIAL (Title and signature) OR AUTHENTICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                   |      |                                                                                                 |         | 21. DATE ISSUED              |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     |                                   |      |                                                                                                 |         | 22. TRAVEL ORDER NUMBER      |  |            |  |  |      |     |     |      |     |         |      |  |                                     |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                   |  |  |  |

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# EXAMPLE I-1, Payment of Lease

| Standard Form 1080<br>Revised April 1982<br>Department of the Treasury<br>I TFRM 2-2500<br>1080-109                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |                                                   |          | <b>VOUCHER FOR TRANSFERS<br/>BETWEEN APPROPRIATIONS AND/OR FUNDS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |                   |  | VOUCHER NO. |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------------|--|-------------|------------------|---------------------|----------|------------|--|--------|------|-----|-------------------|--|--|---------------------------------------------------|--|--|--|--------|-------|--|--|--|--|--|-----------|
| Department, establishment, bureau, or office receiving funds<br><b>Davis &amp; O'Sullivan LTD</b><br><b>PO Box 892, Gaborone, Botswana</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |                                                   |          | SCHEDULE NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |                   |  | BILL NO.    |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  | PAID BY     |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| Department, establishment, bureau, or office charged<br><br><div style="text-align: center;">             ●             <div style="display: inline-block; vertical-align: middle; text-align: left; margin-left: 100px;">               American Embassy<br/>               PSC 31, Unit 1280<br/>               Gaborone, Botswana             </div>             ●           </div>                                                                                                                                                                                                                                                                                                                                                                          |                  |                                                   |          | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">ORDER NO.</th> <th rowspan="2">DATE OF DELIVERY</th> <th rowspan="2">ARTICLE OR SERVICES</th> <th rowspan="2">QUANTITY</th> <th colspan="2">UNIT PRICE</th> <th>AMOUNT</th> </tr> <tr> <th>COST</th> <th>PER</th> <th>DOLLARS AND CENTS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>Payment for lease for Plot 7098 for Feb 00-Feb 01</td> <td></td> <td></td> <td></td> <td style="text-align: right;">62,512</td> </tr> <tr> <td colspan="6" style="text-align: right;">TOTAL</td> <td style="text-align: right;">62,511.72</td> </tr> </tbody> </table> |     |                   |  | ORDER NO.   | DATE OF DELIVERY | ARTICLE OR SERVICES | QUANTITY | UNIT PRICE |  | AMOUNT | COST | PER | DOLLARS AND CENTS |  |  | Payment for lease for Plot 7098 for Feb 00-Feb 01 |  |  |  | 62,512 | TOTAL |  |  |  |  |  | 62,511.72 |
| ORDER NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | DATE OF DELIVERY | ARTICLE OR SERVICES                               | QUANTITY |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          | UNIT PRICE |  | AMOUNT |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                   |          | COST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PER | DOLLARS AND CENTS |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  | Payment for lease for Plot 7098 for Feb 00-Feb 01 |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     | 62,512            |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| TOTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     | 62,511.72         |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| Remittance in payment hereof should be sent to --                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| ACCOUNTING CLASSIFICATION -- <i>Office Receiving Funds</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| <div style="text-align: center;"> <b>CERTIFICATE OF OFFICE CHARGED</b><br/>         I certify that the above articles were received and accepted or the services performed as stated and should be charged to the appropriation(s) and/or fund(s) as indicated below; or that the advance payment requested is approved and should be paid as indicated.       </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">         (Date)       </div> <div style="width: 45%;">         (Authorized administrative or certifying officer)       </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">         (Title)       </div> </div> |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| ACCOUNTING CLASSIFICATION -- <i>Office Charged</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| 21 1 0702 22-3077 P194140.00000 231Z SDN# REN01AJ30001BC J3EX S23185                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |
| Paid by Check No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  |                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                   |  |             |                  |                     |          |            |  |        |      |     |                   |  |  |                                                   |  |  |  |        |       |  |  |  |  |  |           |

NSN 7540-00-634-4230

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## EXAMPLE I-2, Transfer of Funds to State Department for Telephone Service

|                                                                                                                                                                                                                                           |  |  |  |                                                                      |  |          |  |             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|----------------------------------------------------------------------|--|----------|--|-------------|--|
| Standard Form 1080<br>Revised April 1982<br>Department of the Treasury<br>TFRM 2-2500<br>1080-109                                                                                                                                         |  |  |  | <b>VOUCHER FOR TRANSFERS<br/>BETWEEN APPROPRIATIONS AND/OR FUNDS</b> |  |          |  | VOUCHER NO. |  |
| Department, establishment, bureau, or office receiving funds<br><b>U.S. Department of State</b>                                                                                                                                           |  |  |  | SCHEDULE NO.                                                         |  | BILL NO. |  |             |  |
| Department, establishment, bureau, or office charged<br><br><div style="text-align: center;">             ● ●           </div> <b>CPT John Doe</b><br><b>American Embassy - Gaborone</b><br><b>PO Box 48</b><br><b>Gaborone, Botswana</b> |  |  |  | PAID BY                                                              |  |          |  |             |  |

| ORDER NO. | DATE OF DELIVERY | ARTICLE OR SERVICES                                                                                                                                                   | QUANTITY | UNIT PRICE |       | AMOUNT            |
|-----------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|-------|-------------------|
|           |                  |                                                                                                                                                                       |          | COST       | PER   | DOLLARS AND CENTS |
|           |                  | Transfer of funds paid to EMETEL by Department of State for service charges, international long distance calls, plus 10% IVA, made during the month of November 2000. |          |            |       | 121               |
|           |                  |                                                                                                                                                                       |          |            | TOTAL | 121.00            |

Remittance in payment hereof should be sent to --  
97 1 0100.44 4C0125 1184ET0802 571525 0802

ACCOUNTING CLASSIFICATION -- *Office Receiving Funds*

**CERTIFICATE OF OFFICE CHARGED**

I certify that the above articles were received and accepted or the services performed as stated and should be charged to the appropriation(s) and/or fund(s) as indicated below; or that the advance payment requested is approved and should be paid as indicated.

(Date)

(Authorized administrative or certifying officer)

(Title)

ACCOUNTING CLASSIFICATION -- *Office Charged*

21 1 2020 22-2010 P325795.00000 EOR: 2311 SDN# PHN01BJ30002BC J3AC S23185 US \$121.00

Paid by Check No.

NSN 7540-00-634-4230
Previous Editions Are Usable  
USAPPC V200

## EXAMPLE J-1, Reimbursement for Maintenance of FAO Vehicle

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------|--------------|------------------------|--|
| Standard Form 1034<br>Revised October 1997<br>Department of the Treasury<br>1 TFM 4-2000<br>1034-121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                   | <b>PUBLIC VOUCHER FOR PURCHASES AND<br/>SERVICES OTHER THAN PERSONAL</b>                                                                                   |                             |                                                                        |              | VOUCHER NO.            |  |
| U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION<br><b>AMERICAN EMBASSY - QUITO<br/>QUITO, EQUADOR</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |                                                                                                                                                            |                             | DATE VOUCHER PREPARED<br>14 November 2000                              |              | SCHEDULE NO.           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             | CONTRACT NUMBER AND DATE                                               |              | PAID BY                |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             | REQUISITION NUMBER AND DATE                                            |              |                        |  |
| <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;"> <b>PAYEE'S<br/>NAME<br/>AND<br/>ADDRESS</b> </div> <div> <b>CPT John Doe</b><br/>           American Embassy, Quito<br/>           USDAO APO AA 34-39         </div> </div>                                                                                                                                                                                                                                                                                                                                                                      |                                   |                                                                                                                                                            |                             |                                                                        |              | DATE INVOICE RECEIVED  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              | DISCOUNT TERMS         |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              | PAYEE'S ACCOUNT NUMBER |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              | GOVERNMENT BL NUMBER   |  |
| SHIPPED FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |                                                                                                                                                            |                             | TO                                                                     |              | WEIGHT                 |  |
| NUMBER<br>AND DATE<br>OF ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | DATE OF<br>DELIVERY<br>OR SERVICE | ARTICLES OR SERVICES<br><small>(Enter description, item number of contract or Federal supply<br/>schedule, and other information deemed necessary)</small> | QUAN-<br>TITY               | UNIT PRICE<br>COST PER                                                 |              | AMOUNT<br>(!)          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   | Reimbursement for payment of maintenance<br>service fir FAO vehicle<br>Tire repair<br>Electrical Service<br>S/ .141,890                                    |                             |                                                                        |              | 141,890.00             |  |
| (Use continuation sheet(s) if necessary)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |                                                                                                                                                            |                             | (Payee must NOT use the space below)                                   |              | TOTAL                  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              | 141,890.00             |  |
| PAYMENT:<br><input type="checkbox"/> PROVISIONAL<br><input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL<br><input type="checkbox"/> PROGRESS<br><input type="checkbox"/> ADVANCE                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                   | APPROVED FOR<br>BY 2<br>TITLE                                                                                                                              | EXCHANGE RATE<br>= \$1.00   | DIFFERENCES<br>Amount verified, correct for<br>(Signature or initials) |              |                        |  |
| Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| <div style="display: flex; justify-content: space-between;"> <span>(Date)</span> <span>(Authorized Certifying Officer) 2</span> <span>(Title)</span> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| ACCOUNTING CLASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| US \$397.80<br><br>21 1 2020 22-2010 P323752.40000 EOR: 26CA SDN# VEH01BJ30001EC J3CE S23185                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| PAID BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | CHECK NUMBER                      |                                                                                                                                                            | ON ACCOUNT OF U.S. TREASURY |                                                                        | CHECK NUMBER |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | CASH                              |                                                                                                                                                            | DATE                        |                                                                        | PAYEE 3      |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| 1 When stated in foreign currency, insert name of currency.<br>2 If the ability to certify and authority to approve are combined in one person, one signature only is necessary, otherwise the approving official will sign in the space provided, over his official title.<br>When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.                                                                                                   |                                   |                                                                                                                                                            |                             | PER                                                                    |              | TITLE                  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |
| <div style="display: flex; justify-content: space-between;"> <div>           Previous edition usable         </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>PRIVACY ACT STATEMENT</b><br/> <small>The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.</small> </div> <div>           NSN 7540-00-900-2234<br/>           USAPA V4.00         </div> </div> |                                   |                                                                                                                                                            |                             |                                                                        |              |                        |  |

## EXAMPLE J-2, Reimbursement for Utility Bill (Gas)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------|----------------------------------------------|------------------------------------------------------------------------|--|
| Standard Form 1034<br>Revised October 1997<br>Department of the Treasury<br>1 TFM4-2000<br>1034-121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                             | <b>PUBLIC VOUCHER FOR PURCHASES AND<br/>SERVICES OTHER THAN PERSONAL</b>                                                                               |                                          |                           |                                              | VOUCHER NO.<br><br>SCHEDULE NO.                                        |  |
| U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION<br>USDAO GABORONE<br>GABORONE, BOTSWANA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             |                                                                                                                                                        | DATE VOUCHER PREPARED<br>23 January 2001 |                           | PAID BY                                      |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        | CONTRACT NUMBER AND DATE                 |                           |                                              |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        | REQUISITION NUMBER AND DATE              |                           |                                              |                                                                        |  |
| PAYEE'S NAME AND ADDRESS<br><br><div style="border: 1px solid black; padding: 5px; margin: 5px auto; width: 80%;">           MUHAMMED CEDEK<br/>           COMMAND AND STAFF COLLEGE<br/>           GABORONE, BOTSWANA         </div>                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                        | DATE INVOICE RECEIVED                    |                           | DISCOUNT TERMS<br><br>PAYEE'S ACCOUNT NUMBER |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        | GOVERNMENT BILL NUMBER                   |                           |                                              |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        | SHIPPED FROM TO WEIGHT                   |                           |                                              |                                                                        |  |
| NUMBER AND DATE OF ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DATE OF DELIVERY OR SERVICE | ARTICLES OR SERVICES<br><small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small> | QUANTITY                                 | UNIT PRICE<br>COST PER    |                                              | AMOUNT<br>( <sup>1</sup> )                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             | Reimbursement for gas bill for January 2001<br><br>Reimburse 1600.00                                                                                   |                                          |                           |                                              | 550.00                                                                 |  |
| TOTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                        |                                          |                           |                                              | 550.00                                                                 |  |
| (Use continuation sheet(s) if necessary) (Payee must NOT use the space below)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| PAYMENT:<br><input type="checkbox"/> PROVISIONAL<br><input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL<br><input type="checkbox"/> PROGRESS<br><input type="checkbox"/> ADVANCE                                                                                                                                                                                                                                                                                                                                                 |                             | APPROVED FOR<br>BY <sup>2</sup><br>TITLE                                                                                                               |                                          | EXCHANGE RATE<br>= \$1.00 |                                              | DIFFERENCES<br>Amount verified, correct for<br>(Signature or initials) |  |
| Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| _____<br>(Date) (Authorized Certifying Officer) <sup>2</sup> (Title)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| ACCOUNTING CLASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| US \$397.80<br><br>21 1 0702 22-3077 EOR: 233B P194140.00000 SDN# UTL01AJ30001BC J3EX S23185                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| PAID BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | CHECK NUMBER                |                                                                                                                                                        | ON ACCOUNT OF U.S. TREASURY              |                           | CHECK NUMBER                                 |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CASH                        |                                                                                                                                                        | DATE                                     |                           | ON (Name of bank)                            |                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$                          |                                                                                                                                                        |                                          |                           | PAYEE <sup>3</sup>                           |                                                                        |  |
| <sup>1</sup><br>When stated in foreign currency, insert name of currency.<br>If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.<br>When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be. |                             |                                                                                                                                                        |                                          |                           | PER<br><br>TITLE                             |                                                                        |  |
| Previous edition usable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| <b>PRIVACY ACT STATEMENT</b><br>The information requested on this form is required under the provisions of 31 U.S.C. 552 and 552c, for the purpose of disbursing Federal money. The information requested is to identify the particular order and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.                                                                                                                                                                                                                       |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |
| NSN 7540-00-900-2234<br>USAPA V4.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                        |                                          |                           |                                              |                                                                        |  |

## EXAMPLE J-3, Reimbursement for Repair of Water Heater

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------|--|
| Standard Form 1034<br>Revised October 1997<br>Department of the Treasury<br>1 TFM-4-2000<br>1034-121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             | <b>PUBLIC VOUCHER FOR PURCHASES AND<br/>SERVICES OTHER THAN PERSONAL</b>                                                                               |                                          |                                                                                                         |                                              | VOUCHER NO.<br><br>SCHEDULE NO. |  |
| U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION<br>USDAO ISLAMABAD<br>QUETTA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |                                                                                                                                                        | DATE VOUCHER PREPARED<br>9 December 2000 |                                                                                                         | PAID BY                                      |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        | CONTRACT NUMBER AND DATE                 |                                                                                                         |                                              |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        | REQUISITION NUMBER AND DATE              |                                                                                                         |                                              |                                 |  |
| PAYEE'S NAME AND ADDRESS<br><br><div style="border: 1px solid black; padding: 5px; margin: 5px 0;">           Abdul Sotar<br/>           Command and Staff College<br/>           Quetta         </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                                                                        | DATE INVOICE RECEIVED                    |                                                                                                         | DISCOUNT TERMS<br><br>PAYEE'S ACCOUNT NUMBER |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        | GOVERNMENT BILL NUMBER                   |                                                                                                         |                                              |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                        | SHIPPED FROM TO WEIGHT                   |                                                                                                         |                                              |                                 |  |
| NUMBER AND DATE OF ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | DATE OF DELIVERY OR SERVICE | ARTICLES OR SERVICES<br><small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small> | QUANTITY                                 | UNIT PRICE<br>COST PER                                                                                  |                                              | AMOUNT<br>( <sup>1</sup> )      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             | Repair and maintenance for two hot water heaters. All parts and labor included for December 2000<br><br>Reimburse total RS600.00                       |                                          |                                                                                                         |                                              | 19.69                           |  |
| TOTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              | 19.69                           |  |
| PAYMENT:<br><input type="checkbox"/> PROVISIONAL<br><input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL<br><input type="checkbox"/> PROGRESS<br><input type="checkbox"/> ADVANCE                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             | APPROVED FOR<br>BY <sup>2</sup><br><br>TITLE                                                                                                           |                                          | EXCHANGE RATE<br>= \$1.00<br><br>DIFFERENCES<br>Amount verified, correct for<br>(Signature or initials) |                                              |                                 |  |
| Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |
| _____ (Date) _____ (Authorized Certifying Officer) <sup>2</sup> _____ (Title)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |
| ACCOUNTING CLASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |
| US \$19.69<br><br>21 1 0702 22-3077 EOR: 26CB P194140.00000 SDN# REP01CJ3003PK J3EP S23185                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |
| PAID BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | CHECK NUMBER                |                                                                                                                                                        | ON ACCOUNT OF U.S. TREASURY              |                                                                                                         | CHECK NUMBER                                 |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CASH                        |                                                                                                                                                        | DATE                                     |                                                                                                         | ON (Name of bank)                            |                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$                          |                                                                                                                                                        |                                          |                                                                                                         | PAYEE <sup>3</sup>                           |                                 |  |
| <sup>1</sup><br>When stated in foreign currency, insert name of currency.<br>If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.<br>When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.                                                                                       |                             |                                                                                                                                                        |                                          |                                                                                                         | PER<br><br>TITLE                             |                                 |  |
| <div style="display: flex; justify-content: space-between;"> <div>           Previous edition usable         </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>PRIVACY ACT STATEMENT</b><br/> <small>The information requested on this form is required under the provisions of 31 U.S.C. 322b and 322c, for the purpose of disbursing Federal money. The information requested is to identify the particular order and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.</small> </div> <div>           NSN 7540-00-900-2234<br/>           USAPA V4.00         </div> </div> |                             |                                                                                                                                                        |                                          |                                                                                                         |                                              |                                 |  |

## EXAMPLE J-4, Reimbursement for Official Postage

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------|------------------------|--|
| Standard Form 1034<br>Revised October 1997<br>Department of the Treasury<br>1 TFM4-2000<br>1034-121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             | <b>PUBLIC VOUCHER FOR PURCHASES AND<br/>SERVICES OTHER THAN PERSONAL</b>                                                                                                                                              |                                         |                                                                                                                                      |                    | VOUCHER NO.<br><br>SCHEDULE NO.                         |                        |  |
| U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION<br>AmEmbassyt Quito<br>Quito, Ecuador                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                                                                                       | DATE VOUCHER PREPARED<br>4 October 2000 |                                                                                                                                      | PAID BY            |                                                         |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                                                                                                                                                                       | CONTRACT NUMBER AND DATE                |                                                                                                                                      |                    |                                                         |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             |                                                                                                                                                                                                                       | REQUISITION NUMBER AND DATE             |                                                                                                                                      |                    |                                                         |                        |  |
| PAYEE'S NAME AND ADDRESS<br><div style="border: 1px solid black; padding: 5px; margin-top: 10px;">           MAJ John Doe<br/>           American Embassy Quito<br/>           USDAO APO AA 34039         </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |                                                                                                                                                                                                                       | DATE INVOICE RECEIVED                   |                                                                                                                                      |                    |                                                         |                        |  |
| DISCOUNT TERMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| PAYEE'S ACCOUNT NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| SHIPPED FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                                                                                       | TO                                      |                                                                                                                                      | WEIGHT             |                                                         | GOVERNMENT BILL NUMBER |  |
| NUMBER AND DATE OF ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DATE OF DELIVERY OR SERVICE | ARTICLES OR SERVICES<br><small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>                                                                | QUANTITY                                | UNIT PRICE<br>COST    PER                                                                                                            |                    | AMOUNT<br>( <sup>1</sup> )                              |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                             | Reimbursement for the purpose of official postage expense incurred during Oct-Nov 00                                                                                                                                  |                                         |                                                                                                                                      |                    | 5.27                                                    |                        |  |
| <small>(Use continuation sheet(s) if necessary)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                             |                                                                                                                                                                                                                       | <b>TOTAL</b>                            |                                                                                                                                      |                    | 5.27                                                    |                        |  |
| PAYMENT:<br><input type="checkbox"/> PROVISIONAL<br><input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL<br><input type="checkbox"/> PROGRESS<br><input type="checkbox"/> ADVANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             | APPROVED FOR<br><div style="border: 1px solid black; padding: 2px; margin-top: 5px;">           = \$         </div> BY <sup>2</sup> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> TITLE |                                         | EXCHANGE RATE<br><div style="border: 1px solid black; padding: 2px; margin-top: 5px;">           = \$1.00         </div> DIFFERENCES |                    | Amount verified, correct for<br>(Signature or initials) |                        |  |
| Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| <div style="display: flex; justify-content: space-between;"> <span>_____ (Date)</span> <span>_____ (Authorized Certifying Officer) <sup>2</sup></span> <span>_____ (Title)</span> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| ACCOUNTING CLASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| US \$5.27<br><br>21 1 2020 22-2010 P325795.00000 233Y SDN# PMP01AJ30001EC J3AC S23185                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |
| PAID BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | CHECK NUMBER                |                                                                                                                                                                                                                       | ON ACCOUNT OF U.S. TREASURY             |                                                                                                                                      | CHECK NUMBER       |                                                         | ON (Name of bank)      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | CASH                        |                                                                                                                                                                                                                       | DATE                                    |                                                                                                                                      | PAYEE <sup>3</sup> |                                                         |                        |  |
| <sup>1</sup><br>When stated in foreign currency, insert name of currency.<br>If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.<br>When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.                                                                                                                                                        |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      | PER<br><br>TITLE   |                                                         |                        |  |
| <div style="display: flex; justify-content: space-between;"> <div style="font-size: small;">             Previous edition usable           </div> <div style="border: 1px solid black; padding: 5px; flex-grow: 1;"> <b>PRIVACY ACT STATEMENT</b><br/>             The information requested on this form is required under the provisions of 31 U.S.C. 52a and 52c, 1 for the purpose of disbursing Federal money. The information requested is to identify the particular order and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.           </div> <div style="font-size: x-small;">             NSN 7540-00-900-2234<br/>             USAPA V4.00           </div> </div> |                             |                                                                                                                                                                                                                       |                                         |                                                                                                                                      |                    |                                                         |                        |  |



EXAMPLE K-1, APCs for FY01, PD-J3, FAO PROGRAM

21 7 2020 22-2010 P323752.40000 S23185

| <u>COUNTRY</u>            | <u>APC</u> | <u>COUNTRY CODE</u> |
|---------------------------|------------|---------------------|
| Argentina, Buenos Aires   | J3CA       | AR                  |
| Austria, Vienna           | J3AU       | AU                  |
| Bangladesh, Dhaka         | J3DK       | BG                  |
| Bolivia, La Paz           | J3CL       | BL                  |
| Belgium, Brussels         | J3BE       | BE                  |
| Botswana, Gaborone        | J3BW       | BC                  |
| Brazil, Rio De Janeiro    | J3CB       | BR                  |
| Cameroon, Yaounde         | J3CY       | CM                  |
| China, Beijing            | J3CH       | CH                  |
| Colombia, Bogotá          | J3CD       | CO                  |
| Chile, Santiago           | J3CC       | CI                  |
| Croatia, Zagreb           | J3CT       | CT                  |
| Ecuador, Quito            | J3CE       | EC                  |
| Egypt, Cairo              | J3CR       | EG                  |
| Estonia, Tartu            | JETA       | ES                  |
| Ethiopia                  | J3AE       | ET                  |
| France, Paris             | J3FR       | FR                  |
| Germany, Berlin           | J3GE       | GE                  |
| Greece, Thessaloniki      | J3GR       | GR                  |
| Guatemala, Guatemala City | J3CG       | GT                  |
| Hungary, Budapest         | J3HU       | HU                  |
| India, New Delhi          | J3IN       | IN                  |
| Indonesia, Jakarta        | J3ID       | ID                  |
| Italy, Rome               | J3IT       | IT                  |
| Ivory Coast, Abidjan      | J3IV       | IV                  |
| Japan, Tokyo              | J3JA       | JA                  |
| Jordan, Amman             | J3JR       | JO                  |
| Korea, Seoul              | J3KR       | KR                  |
| Kuwait                    | J3KU       | KW                  |
| Malaysia, Kuala Lumpur    | J3MY       | MY                  |
| Mexico, Mexico City       | J3CM       | MX                  |
| Morocco, Rabat            | J3MR       | MR                  |
| Netherlands, The Hague    | J3NL       | NL                  |
| Niger, Niamey             | J3NG       | NG                  |
| Norway, Oslo              | J3NR       | NO                  |
| Oman, Muscat              | J3MU       | MU                  |
| Pakistan, Islamabad       | J3PK       | PK                  |
| Peru, Lima                | J3CL       | PE                  |
| Poland, Warsaw            | J3PL       | PL                  |
| Portugal, Lisbon          | J3PR       | PO                  |
| Romania, Bucharest        | J3RR       | RR                  |
| Saudi Arabia              | J3SA       | SA                  |
| Senegal                   | J3SG       | SG                  |
| Spain, Madrid             | J3SP       | SP                  |
| Singapore                 | J3SN       | SN                  |
| Thailand, Bangkok         | J3TH       | TH                  |
| Tunisia                   | J3TS       | TS                  |

|                     |      |    |
|---------------------|------|----|
| Turkey, Istanbul    | J3TU | TU |
| Uruguay, Montevideo | J3CU | UY |
| Venezuela, Caracas  | J3CV | VE |
| Vietnam, Hanoi      | J3VM | VM |
| Zimbabwe, Harare    | J3HA | ZI |

EXAMPLE K-2, APCs for FY01, PD-J3, Family Housing Program (FHP)

21 1 0702 22-3077 P194140.00000 S23185

| <u>COUNTRY</u>       | <u>APC</u> | <u>COUNTRY CODE</u> |
|----------------------|------------|---------------------|
| Bangladesh, Dhaka    | J3EB       | BG                  |
| Botswana, Gaborone   | J3EX       | BC                  |
| Cameroon, Yaounde    | J3EC       | CM                  |
| Croatia, Zagreb      | J3E3       | CT                  |
| Egypt, Cairo         | J3EE       | EG                  |
| Ethiopia             | J3EA       | ET                  |
| Greece, Thessaloniki | J3EG       | GR                  |
| Hungary, Budapest    | J3E5       | HU                  |
| India, New Delhi     | J3EI       | IN                  |
| Indonesia, Jakarta   | J3ED       | ID                  |
| Ivory Coast, Abidjan | J3EF       | IV                  |
| Jordan, Amman        | J3EJ       | JO                  |
| Korea, Seoul         | J3EK       | KR                  |
| Kuwait               | J3FA       | KW                  |
| Morocco, Rabat       | J3ER       | MR                  |
| Niger, Niamey        | J3EN       | NG                  |
| Oman, Muscat         | J3FC       | MU                  |
| Pakistan, Islamabad  | J3EP       | PK                  |
| Philippines, Manila  | J3EM       | RP                  |
| Poland, Warsaw       | J3E7       | PL                  |
| Romania, Bucharest   | JEE8       | RR                  |
| Senegal              | J3EY       | SG                  |
| Tunisia              | J3ES       | TS                  |
| Turkey, Istanbul     | J3ET       | TU                  |
| Zimbabwe, Harare     | J3EV       | ZI                  |

## **CHAPTER 9**

### **INTERNATIONAL COOPERATIVE ADMINISTRATIVE SERVICES (ICASS)**

1. ICASS is a system for delivering shared services at overseas posts. In other words, the State Department bills the FAO program to operate out of embassies. You must review any proposed ICASS documents and/or budget invoices that come your way. DAMO-SSF is the approving authority for ICASS at all ICT sites. Your ICASS account is separate from the DAO and/or the ODC. The Army account that we are under is entitled: 2105.2 ARMY-HQDA, DCSOPS STRATEGIC LEADERSHIP DIVISION.
2. The local POCs are your embassy finance officer and the OPSCO in the DAO. You will probably have to do worksheets to estimate your costs and sign invoices about twice a year with the embassy finance officer. DAMO-SSF needs to see anything that you are asked to sign regarding ICASS, for example, the “Invoice by Agency (Target Budget) for FYXX” and the “Department of State – ICASS Specific Expenses Invoice by Agency for FYXX” spreadsheet. Always run these by the OPSCO, this is where their expertise in dealing with State can really be an asset. You are required to fax a copy of the final version that you have negotiated on site to DAMO-SSF for Proponent review and approval prior to signing. After review, DAMO-SSF will instruct you to sign the document. Normally the senior FAO at each site signs the final documents. Turn in the invoice to the embassy finance office and forward a signed copy back to DAMO-SSF.
3. The most important thing to remember about the FAO Program and ICASS is that you are not “full time” members of the embassy and therefore should ONLY receive such support as is needed to accomplish your mission. Take the time to carefully review all ICASS agreements and make sure that you are not being charged for services that you do not require. If you are “remote sited” at a foreign school or similar situation, you should receive only essential services and at the lowest capitation rates.
4. ICASS is the principal means by which the U.S. Government provides and shares the cost of common administrative support at its more than 200 diplomatic and consular posts overseas. The ICASS system seeks to provide quality services at the lowest cost, while attempting to ensure that each agency bears the cost of its presence overseas. ICASS is a break-even system; the charge to the customer agencies equals the cost of service inputs.
5. A full range of administrative services is available through the ICASS program. These include motor pool operations and vehicle maintenance, travel services, reproduction services, mail and messenger services, information management, reception and telephone system services, purchasing and contracting, personnel management, cashiering, vouchering, accounting, budget preparation, non-residential security guard services, and building operations.
6. Agencies subscribe to ICASS services by signing a Memorandum of Understanding (MOU) with the service provider. The post-specific MOU and its attachments describe the services offered by the service provider and the performance standards for each

service. There is also an ICASS Charter that establishes the ICASS system at post and describes the basic operating procedures.

7. The ICASS system is established at post under the authority of the Chief of Mission. The Chief of Mission is responsible for ensuring that the post has a functioning ICASS Council and that the relationship between the Council and service provider(s) is constructive such that ICASS services are delivered fairly and effectively. In the event that an ICASS Council cannot resolve a dispute with the service provider or between agencies on the Council, the Chief of Mission must make a ruling to resolve the dispute.

8. The post ICASS Council is comprised of the heads of any agency or office that receives its own ICASS invoice. The Council sets shared service priorities, selects service providers, approves the post's ICASS budget, approves all new ICASS support positions, develops service standards collaboratively with the service provider, and annually assesses the performance of all service providers at post. Some post ICASS Councils establish an ICASS Working Group to research ICASS issues and develop proposals for improving ICASS services.

9. The costs of shared administrative support are distributed to cost centers representing the services being offered. The ICASS system takes into account the differences between large posts and small. Large posts and most medium-sized posts distribute costs to 32 different ICASS cost centers. Smaller posts generally use a system called ICASS Lite, which distributes the cost of the same services to 16 cost centers for ease of administration.

10. The factor for determining agencies' use of services varies by cost center. For some services, actual transactions (e.g., number of vouchers processed) are the basis for determining use. For others, use is calculated by allocating a percentage of the cost based on head count, number of square meters of office space occupied, number of computer peripherals serviced or a similar factor. In some cases, an agency may perform portions of a service itself and not require the full range of functions offered by the ICASS service provider for that service. In such cases, the ICASS Council may agree to modify the agency's usage or workload count for that service either to 33 or 66 % of full service. Not all ICASS services are modifiable.

11. When the initial budget for the fiscal year is prepared at each diplomatic mission, the post utilizes each agency's actual use of services in the prior year, or projects usage for new subscriptions. The expenses for each service are then divided by the total number of units used to establish a unit cost. The unit cost is then multiplied by the number of units used by agency to determine each agency's cost for that service. To this figure is added a proportional share of the cost of administrative overhead and the cost of services consumed by ICASS administrative personnel to arrive at each agency's invoice for services at that post. Agency heads at post sign their invoices at the time that the post's ICASS Council approves the budget.

## CHAPTER 10

### FAO HOUSING

1. FAOs on ICT live in a variety of circumstances, depending on their site location. Normally, FAO trainees live in leased housing on the local economy. When necessary, they live in quarters provided by a host nation or those leased from an embassy housing pool.
2. FAO trainees at **most** FAO training sites reside in private leased housing, paid for with the officer's BAQ and Overseas Housing Allowance (OHA). OHA for a given location is determined by the Per Diem, Travel and Travel Allowance Committee. OHA is similar to the Variable Housing Allowance (VHA) used in CONUS providing a variable additional monthly allowance for housing expenses based on local costs. OHA also includes allowances for average utility and recurring maintenance costs as well as moving out expenses.
3. Requests for OHA are processed with the Finance and Accounting Office (F&AO) servicing the student. The F&AO will require the following information to process requests for OHA:
  - a. Amount of rent paid and type of currency (foreign or U.S.) in which rent is paid.
  - b. Utility costs (note whether included in rental expense).
  - c. Member is with or without dependents.
  - d. Member is legally separated or divorced and paying alimony and/or child support.
  - e. Member is sharing quarters with other service members and number of other service members.
  - f. Date of occupancy or change of privately leased quarters.
  - g. Copy of lease agreement (English translation).
4. At select sites, ICT FAOs are provided housing either through the U.S. Embassy housing pool or through direct leasing arrangements. These officers do not receive OHA. In support of those sites, DAMO-SSF has authority from the Corps of Engineers to authorize obligation of funds for government overseas leased housing at FAO training locations where the cost falls below the Congressionally-imposed ceiling (currently \$20,000/year). This ceiling includes cost of the annual lease as well as utility and maintenance expenses related to the family housing unit.

5. Annual leases of \$20,000 and above must receive congressional approval before the housing is occupied. Such requests should be directed to DAMO-SSF. Congressional approval requires 60-90 days, so the earliest possible submission of the high cost government lease request is strongly encouraged. All requests for new government leased housing must include a message (see Example E, Chapter 8) with all relevant information included. This message must be sent to DAMO-SSF. Additionally, the type of currency and rate of exchange effective at the time of the application, as well as any known initial occupancy requirements must be included in the message.
6. DAMO-SSF also has the authority to provide family housing funds to offset anticipated start-up expenses, e.g., painting and upgrade of the quarters, purchase/replacement of furniture/appliances, etc (not to exceed 25% of annual rent). Approval of furniture purchase and transportation at government expense are authorized normally in areas where the length of the FAO training tour and inability to obtain timely receipt of household goods shipments support such a determination. Requests for family housing funds should be forwarded to DAMO-SSF with documented substantiation of the requirement to include name of item along with cost.
7. In general, FAO sites that anticipate a requirement for new government leased housing should contact DAMO-SSF as early as possible to obtain a clarification of current guidance and specific budgetary considerations.

## CHAPTER 11

### FAO PROPERTY

1. The FAO Program maintains an extensive amount of property worldwide, ranging from non-tactical vehicles to household furnishings and office automation equipment. With property hand receipted to nearly 50 ICT locations, we are, naturally, concerned about accountability and preventing misuse of this property.
2. The single most important thing to know about the FAO property is that we do not have funding for durable or non-expendable items. We control only our FAO Training (P32) funds and these funds cannot go to purchasing property. Requirements such as furnishings and appliances must be charged to FAO Family Housing (P19) funds. We must receive Army Housing Board approval for property purchases (other than expendables), so ICT FAOs must receive our approval before ordering these items. All other charges, language training, vehicle repairs, security services, comes out of P32 funds, in other words, ***your travel money***.
3. General guidelines for property accountability.
  - a. ICT sites must establish and maintain property accountability for all government property procured in support of the FAO ICT program as prescribed in procedures outlined in AR 710-2 and AR 735-5.
  - b. The senior ICT FAO at each site will serve as hand receipt holder.
  - c. ICT FAOs will normally sign for all FAO property on DA Form 2062. FAO may use their embassy GSO printout. We have no preference as long as all required information is listed and a valid signature and date are present. **FAOs who choose to use the GSO printout must understand that we will continue to hold them responsible for correctness and timeliness of hand receipt actions.**
  - d. Signed and dated hand receipts must be submitted to DAMO-SSF within 30 days of arrival on station, semi-annually (on 15 April and 15 October) and when there is a change of hand receipt holder or addition/deletion of property. The hand receipt holder will conduct a 100 percent inventory with the incoming FAO prior to departing country. If the hand receipt holder departs the country prior to arrival of incoming FAO, the ICT FAO rater or his/her designated representative will conduct a 100 percent inventory and sign for property until arrival of incoming FAO who will then conduct an inventory and sign for all property.
  - e. FAOs will include **all** Government purchased items on the hand receipt, to include furnishings and appliances, library reference material, computer equipment and software, and vehicles and accessories. FAOs will not maintain non-FAO property on the FAO hand receipt.



f. Any lost, damaged or destroyed property will be accounted for IAW procedures outlined in AR 735-11. Lost, damaged or destroyed property will be reported to DAMO-SSF within 5 working days from time of discovery.

g. The hand receipt holder has authority to sub-hand receipt property to other ICT FAOs, if applicable, in his/her country. Permission to sub-hand receipt to other than ICT FAOs in same country is retained by DAMO-SSF. FAO property is provided solely in support of the FAO ICT program.

h. Upon change of hand receipt holders, a memorandum and copy of DA Form 2062 will be sent to DAMO-SSF within five working days indicating the following:

(1) Name, rank, SSN of the new ICT hand receipt holder.

(2) Description of any new property, not on the previous hand receipt, and procured with FAO funds in support of the ICT program. Provide serial numbers, etc.

(3) Verify FAO vehicle(s) make/year/identification number with every change of hand receipt holder.

i. Hand receipt responsibility will be part of ICT FAO duty description as annotated on DA Form 67-9-1.

j. FAO Vehicles. This is our most contentious issue and the subject of much misunderstanding on the part of ICT FAOs.

(1) The FAO Program is NOT authorized any vehicles. That said, we do have an extensive fleet of non-tactical vehicles, most of them in ICT sites in developing countries. ICT FAOs frequently complain about the condition of their vehicles and of our inability to get them replaced in a timely fashion. The Proponent, however, cannot buy vehicles. We rely on resources allocated by TACOM. Each year TACOM purchases for our program a number of vehicles according to priorities we provide. Currently, we receive 2-4 new vehicles a year, but this in no way approaches our need for replacement vehicles. The life span of a FAO vehicle is short and the cost of keeping it roadworthy is high. All funds for repairs to your FAO vehicle(s) come out of your P32 account and therefore will have a direct effect on your training budget.

(2) FAOs need to maximize the life span of their vehicles by using them only for their intended purpose and performing aggressive maintenance on them. The maintenance schedule you'll find in an operator's manual will in no way reflect the level of care required to keep a vehicle roadworthy in Bangladesh or Niger.

(3) FAOs should make every effort to keep their vehicles roadworthy. Seek additional funding from the Proponent, as necessary. We do not want you operating an unsafe vehicle, nor do we want “hangar queens”. Look for a replacement vehicle “in house”. The best source is from your supporting DAO/SAO agency. In many cases, they have a vehicle to be replaced that is newer and has lower mileage than the FAO vehicle. As long as the vehicle is in good working condition and does not need any significant repair work, it could be laterally transferred to you rather than turning it in for disposal. Contact DAMO-SSF prior to disposing of or accepting any vehicle.

(4) Understand the rules that govern the use of a FAO vehicle. Simply put, a FAO vehicle is not a substitute for a FAO POV. All FAOs are either authorized POV shipment or provided transportation by their DoD agency. FAOs who elect not to ship a vehicle can purchase one in country. **The FAO vehicle is NOT a personal asset.** It is an Army asset provided solely in support of in-country and regional travel. They are for the use of all FAOs in the region. They are **not** provided to meet the daily transportation needs of FAOs or their families. Duty-to-Domicile can only be authorized by the Secretary of the Army, must be renewed every 90 days and will only be authorized in response to a direct security/threat situation. If vehicle(s) are used for daily transport with Duty-to-Domicile authorization, the FAO must pay ALL related costs.

## CHAPTER 12

### CELL PHONE AND INTERNET POLICY

1. **Cell Phones:** Several of our ICT sites require FAOs to have a cell phone for security purposes. The purpose of these phones is to provide immediate access to the embassy in case of an emergency. These phones **ARE NOT** provided for FAO's personal or official phone calls. DAMO-SSF funds cell phones only when the Defense Attaché Office or Regional Security Officer at the embassy has established a formal policy (in writing) that **REQUIRES** all personnel to carry cell phones for force protection. In such instances, DAMO-SSF will only pay for the basic phone service and emergency calls, to include required communication checks. The user will pay for all other calls. Funds for cell phones will come from the budget already allocated to that site; there will be no budget plus up to cover cell phone costs. The monthly telephone bill requires a statement signed by the user certifying that the charges are specifically those related to force protection.

2. **Internet Access:** Department of the Army policy prohibits DAMO-SSF from funding Internet access. Internet access is considered part of your personal communications, much like your home phone. Because the Internet can be used for personal, in addition to official business, with no means of oversight, the Army cannot pay for it.

## **CHAPTER 13**

### **EMERGENCY EVACUATION**

If a situation occurs in which it is necessary for you to evacuate the ICT site, you and your family should be handled like any other military member of the embassy Country Team. In the case of a medical emergency, the funding will come from the supporting regional military hospital as for all military personnel and their families. In the case of a Department of State or CINC related evacuation, the FAO/family are, again, handled like any other member of the embassy. In this regard, you must ensure you and your family are part of the embassy's Non-combatant Evacuation Operation (NEO) plan.

**CHAPTER 14**  
**MEMORANDUM OF AGREEMENT (MOA)**  
**BETWEEN**  
**THE DEFENSE INTELLIGENCE AGENCY (DIA),**  
**AND**  
**THE DEFENSE SECURITY ASSISTANCE AGENCY (DSAA),**  
**AND**  
**THE U.S. ARMY**

SUBJECT: U.S. Army Foreign Area Officer (FAO) In-Country Training (ICT) Program

1. Purpose. To define tasks and responsibilities for U.S. Defense Attaché Office (USDAO), Security Assistance Office (SAO), and HQDA, Office of the Deputy Chief of Staff for Operations and Plans (ODCSOPS), (DAMO-SSF) support to the FAO ICT Program.

2. Supersession. This MOA supersedes Memorandum of Understanding, HQDA, OACSI, 13 Mar 81, subject: Foreign Area Officer (FAO) Program.

3. Scope. This MOA is applicable to DIA, DSAA, and HQDA support of the U.S. Army's Foreign Area Officer In-Country Training Program.

4. Background.

a. The purpose of ICT is to provide Foreign Area Officers the opportunity to acquire regional expertise by combining previous language and graduate schooling with firsthand practical experience in a designated region of the world. The ultimate objective is to train Army officers to perform effectively in key political-military positions.

b. FAOs serve worldwide as politico-military staff officers in OSD, the Department of State, the Joint Staff, unified and specified commands, the Defense Intelligence Agency, the Defense Security Assistance Agency, the Army Staff, and Army MACOMs. FAOs also serve as security assistance officers, Defense and Army attaches, and as politico-military instructors at Army and DOD service schools.

c. Individual ICT objectives include enhancing skills in language proficiency, military knowledge, geography, economics, socio-cultural understanding, political awareness, and inter-personal skills/contacts.

d. FAO ICT trainees are assigned for administration to one of the following organizations, depending upon the officers' designated regional area of concentration:

(1) U.S. Army Security Assistance Administration Latin America (USASAALA), Ft. Clayton, Panama; (*This organization no longer exists.*)

- (2) Institute of Eurasian Studies (IES), Garmisch, Germany;
- (3) U.S. Army Field Support Center (USAFSC), Ft. Meade, MD;
- (4) U.S. Army Support Center--Hawaii (USASCH), Ft. Shafter, HI;
- (5) USARJ/IX Corps, Camp Zama, Japan; and,
- (6) U.S. Army Eighth PERSCOM, Seoul, Korea.

e. FAO Regional Coordinators, who provide oversight of FAO training within their AOR, are established as follows:

- (1) International Military Affairs Division (IMA), U.S. Army Pacific Command, Ft. Shafter, HI;
- (2) Coalition Warfare Division (AFRD-DTC), U.S. Army Central Command, Ft. McPherson, GA; and,
- (3) U.S. Army Security Assistance Administration Latin America (LOSA-SA-PP), Ft. Clayton, Panama. *(This organization no longer exists.)*

## 5. Agreements.

a. FAO trainees are attached for training to the USDAO or SAO within a designated country for the specific purpose of successfully achieving in-country training objectives.

b. Implementation of new ICT programs, or changes to existing ones, will be coordinated among DAMO-SSF, the USDAO/SAO, and DIA/DSAA, as appropriate.

c. FAO trainees minimize administrative burden on the USDAO/SAO by preparing their own ICT-related reports, e.g., program of instruction, trip reports, mid and end-of-tour reports, messages, and country clearance requests. DAMO-SSF attempts to ensure all ICT sites are provided word processing/computer capabilities to limit staff administrative requirements.

d. The USDAO or SAO provides necessary administrative support for the FAO trainee, e.g., office space (if available) and processing of FAO-related messages, country clearance requests, notification of personnel gain/loss, TLA, TDY, leave, and DODDS applications.

e. DIA and DSAA administrative funds are not available for direct contribution to the support of the trainee. Support provided must not collectively constitute a majority of the time of any one staff member.

f. The USDAO or SAO provides supervision and mentorship to the FAO trainee. Normally, supervisors will be Army officers, e.g., Assistant Army Attaché and Army Attaché or Army Section Chief and Chief, Security Assistance Office.

g. FAO supervisors:

(1) assist, guide and mentor FAO trainee.

(2) assist in obtaining comprehensive country team briefings/orientations in the host and regional nations.

(3) do not use trainee for purposes other than training--the trainee is not an accredited member of the Diplomatic Mission and cannot be used as an assistant attaché or security assistance officer.

(4) coordinate individual training programs with the trainee, the host-nation, the appropriate regional coordinator, and the FAO Proponent Office (HQDA, DAMO-SSF).

(5) coordinate with DAMO-SSF and appropriate regional coordinator on all other matters pertaining to the FAO ICT Program or trainee.

(6) serve as rater and senior rater for the trainee IAW AR 623-105.

(7) ensure a viable sponsor program is in effect for officers designated to conduct ICT at their location. Post Report, local FAO ICT SOP, and other information which enables the FAO family to prepare for ICT should be forwarded.

(8) review, critique, and forward trainee reports, e.g., individual POI, trip reports, mid- and end-of-tour reports, and local SOP to DAMO-SSF.

(9) include trainee and family in emergency contingency plans.

(10) include trainee and family in embassy, USDAO and SAO social functions/activities, as appropriate.

(11) assist trainee in acquiring adequate housing, medical, and family support.

(12) review the Foreign Affairs Administrative Support (FAAS) (*Now ICASS*) Agreement for the local FAO ICT Program.

h. DAMO-SSF:

(1) provides ARSTAF point of contact for the FAO Program.

- (2) provides funding for ICT-related in-country and regional travel.
- (3) provides funding for office supplies and equipment, and FAO library.
- (4) provides funding for operation and maintenance of FAO vehicles, where authorized.
- (5) provides funding for government leased housing, utilities, furniture, maintenance, and security, as required. Use of Overseas Housing Allowance (OHA) to rent quarters on the local economy is the preferred housing method, contingent upon local conditions.
- (6) provides funding for FAAS (*Now ICASS*) costs, through Department of State.
- (7) coordinates with the U.S. Army Engineering, Housing Support Center (CEHSC-HM), Ft. Belvoir, VA for obtaining Congressional approval of high-cost government leases, as required.
- (8) coordinates with the Deputy Assistant Secretary of Army for Finance and Accounting, U.S. Army Finance and Accounting Center (SAFM-FABOD), Indianapolis, IN for payment of costs associated with officers attending a School of Other Nations (SON) Program, e.g., tuition, tutoring, textbooks, supplies, and school-related travel.
- (9) coordinates with the U.S. Army Field Support Center (USAFSC), Ft. Meade, MD for FAO vehicle procurement and disposal, as required.



6. Implementation and Termination. This memorandum of agreement shall becoming binding and enter into force upon signature of all parties. It will be reviewed annually for accuracy. Any necessary changes will be made in writing by mutual agreement. Termination of the agreement may be made at any time when any party provides 90 days minimum written notice to the other parties.

CONCLUDED AND SIGNED IN THREE  
ORIGINALS FOR THE DEFENSE  
SECURITY ASSISTANCE AGENCY:

**Original Signed**

---

TEDDY G. ALLEN  
Lieutenant General, USA  
Director, Defense Security  
Assistance Agency

---

10 December 1990  
(date)

CONCLUDED AND SIGNED IN  
ORIGINALS FOR THE DEFENSE  
INTELLIGENCE AGENCY:

**Original Signed**

---

HARRY E. SOYSTER  
Lieutenant General, USA  
Director, Defense  
Intelligence Agency

---

18 January 1991  
(date)

CONCLUDED AND SIGNED IN THREE  
ORIGINALS FOR THE DEPARTMENT  
OF THE ARMY:

**Original Signed**

---

DENNIS J. REIMER  
Lieutenant General, GS  
Deputy Chief of Staff  
for Operations and Plans

---

20 November 1990  
(date)

## CHAPTER 15

### FAO PROPONENT and PERSCOM ASSIGNMENT OFFICE CONTACTS

|                                                                                                                                                                                                                                  |                                                                                                                                                           |                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><u>FAO PROPONENT DIVISION</u></b><br>The FAO Proponent Division, ODCSOPS<br>ATTN: DAMO-SSF, Rm. 3B521<br>400 Army Pentagon<br>Washington, DC 20310-0400<br>Fax: (703) 695-1658/DSN 225-1658<br>HQDA WASHINGTON DC//DAMO-SSF// | <b><u>FAO COORDINATOR- DLI</u></b><br>Defense Language Institute,<br>ATTN: ATFL-TDS<br>Presidio of Monterey, CA 93944<br>Fax: (408) 242-5414/DSN 878-5414 | <b><u>FAO ASSIGNMENTS TEAM</u></b><br>U.S. Army Personnel Command<br>(PERSCOM)<br>ATTN: TAPC-OPB-A (FAO Management)<br>200 Stovall Street<br>Alexandria, VA 22332-0411<br>FAX: 703-325-0783/DSN 221-0783 |
| <b>COL Mark Volk</b><br>Division Chief, Strategic Leadership<br>Division<br>(703) 697-3600/DSN 227-3600<br>volkmar@hqda.army.mil                                                                                                 | <b>COL Manuel Fuentes</b><br>(408) 242-5110/5436; DSN: 878-5110<br>fuentesm@pom-emh1.army.mil                                                             | <b>LTC Grady Reese</b><br>Chief, FAO Assignments Branch<br>(703) 325-3153 DSN 221-3153<br>reeseg@hoffman.army.mil                                                                                        |
| <b>LTC Rich Coon</b><br>Regional Program Manager 48D, F, H, I<br>(703) 697-6796/DSN 227-6796<br>richard.coon@hqda.army.mil                                                                                                       |                                                                                                                                                           | <b>MAJ Dan Case</b><br>Assignments Officer 48B, F, J<br>(703) 325-2755/DSN 221-2755<br>cased@hoffman.army.mil                                                                                            |
| <b>MAJ Glen Grady</b><br>Regional Program Manager 48G, J<br>(703) 614-2336/DSN 224-2336<br>glen.grady@hqda.army.mil                                                                                                              |                                                                                                                                                           | <b>MAJ Evelyn Ostrom</b><br>Assignments Officer 48C, E<br>(703) 325-3134/DSN 221-3134<br>ostrom1@hoffman.army.mil                                                                                        |
| <b>MAJ Warren Hoy</b><br>Regional Program Manager 48B<br>(703) 614-1766/DSN 224-1766<br>warren.hoy@hqda.army.mil                                                                                                                 |                                                                                                                                                           | <b>MAJ Dino Pick</b><br>Assignments Officer 48D, G, H, I<br>(703) 325-3132/DSN 221-3132<br>pickd@hoffman.army.mil                                                                                        |
| <b>LTC D. Ben Reed</b><br>Regional Program Manager 48C, E<br>(703) 697-4013/DSN 227-4013<br>douglass.reed@hqda.army.mil                                                                                                          |                                                                                                                                                           | <b>Mrs. Aundra Brown</b><br>Accessions/Training 48D, E, G, J<br>(703) 325-3121/DSN 221-3121<br>brown0@hoffman.army.mil                                                                                   |
| <b>Ms. Patricia A. Jones</b><br>Budget Analyst/Resource Manager<br>(703) 697-6317/DSN 227-6317<br>jonesp@hqda.army.mil                                                                                                           |                                                                                                                                                           | <b>Mrs. Frances Ware</b><br>Accessions/Training 48B, C, F, H, I<br>(703) 325-3135/DSN 221-3135<br>waref@hoffman.army.mil                                                                                 |
| <b>Ms. Sabrina Neely</b><br>FAO Property Book Manager<br>(703) 693-2498/DSN 223-2498<br>neelys@hqda.army.mil                                                                                                                     |                                                                                                                                                           |                                                                                                                                                                                                          |

## CHAPTER 16

### U.S. ARMY FIELD SUPPORT CENTER

1. FAOs receive finance and personnel service support from The U.S. Army Field Support Center (FSC), Hanover, MD, during ICT. The FSC's capabilities include:
  - a. Finance actions, including travel settlements, advances, pay inquires, processing adjustments/changes to entitlements, LES distribution, and Civilian Clothing Allowances.
  - b. Personnel actions to include processing of OERs and awards (filing only), updating official military records, and remote site language proficiency testing.
2. The FSC does not process:
  - a. Permissive Jump Status. See Chapter 18.
  - b. Frocking. See Chapter 18.
3. Arrival actions.
  - a. FAOs must send the FSC an arrival message (Encl 1, page 84) within 24 hours of arrival on station. Normally, the DATT or sponsoring agency will do this. Since BAQ, OHA, and COLA are tied to this message, it is vital to ensuring your entitlements are correctly adjusted after your PCS.
  - b. Within 45 days of arrival in country, where appropriate, FAOs must send the following to USAFSC:
    - (1) Request to stop BAQ (DA Form 5960).
    - (2) Request to start OHA (DD Form 2367 and a copy of your lease).
    - (3) Request to start COLA (DA Form 4187).
  - c. Travel settlement. Complete the DD Form 1351-2 (Travel Voucher) and forward to USAFSC, FA&O. If TLA/E is requested, complete this request and forward at the same time. Upon reimbursement/settlement, ensure you forward a final settlement voucher to FA&O.
  - d. Civilian Clothing Allowances (CCA): Governed by AR 700-84 (Issue and Sale of Personal Clothing). The duties and or/security requirements oblige many ICT FAOs to wear civilian business attire. These officers are eligible for CCA, however, that determination is made by the immediate chain of command (ie, SAO or DAO, etc) IAW the conditions in AR 700-84. Essentially, an officer's duties must require he/she wear civilian attire **at least 50%** of the duty day. If appropriate, the FAO will complete a request for CCA and forward through his/her chain of command with a copy of

assignment orders through the US Army Field Support Center (ATTN:IASV-P), Fort Meade, MD, to USAINSCOM (IAPE-MP-P), Fort Belvoir, VA, for verification and approval AR 700-84 contains all the instructions for how to do this.

4. LES distribution. Most sites receive theirs by DAWN or HOCNET account.

5. Awards. Normally, FAOs on ICT do not receive achievement and/or PCS awards. However, this is possible for FAOs performing collateral duties (exercise officer, AO for bi-lateral conference, etc) for their sponsoring agency (DAO, SAO, etc). In this case, the sponsoring agency has sole responsibility for processing this award; that agency's chain of command will approve the DD Form 638 (Recommendation for Award) and forward, when completed to the FSC.

6. Foreign Language Proficiency Pay (FLPP). The Attaché Management Division, USAFSC can send testing materials to an appointed test proctor on site. That individual will be authorized to administer the DLPT at your location. Upon completion, the proctor sends the results directly to USAFSC for processing.

7. Official Credit Cards. The FSC does not support government credit cards for official travel. All travel must be paid either with personal credit cards or by using a cash advance. Due to the risks involved with carrying large amounts of cash while traveling, you should use travelers check or, if possible, credit cards.

8. For all other FAO issues, see the USAFSC Finance and Accounting Office Guide, dated 1 Sep 98. All ICT sites should have this on hand. If not, contact the FAO Proponent office.

9. Points of Contact: Encl 2 (page 85).

## ARRIVAL NOTIFICATION

1. NAME: \_\_\_\_\_
2. SSN: \_\_\_\_\_
3. GRADE \_\_\_\_\_
4. DATE DEPARTED LAST DUTY STATION: \_\_\_\_\_ TIME \_\_\_\_\_
5. DATE DEPARTED / ARRIVED CONUS: \_\_\_\_\_
6. DATE ARRIVED NEW DUTY STATION: \_\_\_\_\_ TIME \_\_\_\_\_
7. ACCOMPANIED STATUS (NUMBER OF DEPENDENTS): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. QUARTERS STATUS:

DATE ENTERED TLA STATUS: \_\_\_\_\_

DATE SIGNED FOR FAMILY GOV QUARTERS: \_\_\_\_\_

DATE MOVED INTO PRIVATE QUARTERS: \_\_\_\_\_

- |                                                           |                 |
|-----------------------------------------------------------|-----------------|
| 9. DATE AUTHORIZED FDP, RNA, AND / OR COLA<br>ENTITLEMENT | DATE AUTHORIZED |
| _____                                                     | _____           |
| _____                                                     | _____           |
| _____                                                     | _____           |
| _____                                                     | _____           |

10. NOTE: IF STARTING ANY ENTITLEMENT THE ORIGINAL PAPERWORK (DA4187 FOR RNA, DA 5960 FOR BAQ, DD2367 FOR OHA, ETC) MUST BE RECEIVED IN THE FINANCE OFFICE WITHIN 45 DAYS.

# **PERSONNEL AND FINANCE SUPPORT CONTACT LIST** **for** **FOREIGN AREA OFFICERS**

## **PERSONNEL**

(Army Field Support Center, INSCOM)

ADDRESSES:      COMMANDER  
                       ATTN IAFS-P-A  
                       ARMY FIELD SUPPORT CENTER  
                       375 CHAMBERLIN AVE SUITE 5904  
                       FORT MEADE MD 20755-5904

USAFSC  
                       Attaché Personnel Service Center  
                       7321 Parkway Drive South, Suite 104A  
                       Hanover, MD 21076  
                       (Use this address for express mail)

TELEPHONE CONNECTIVITY  
 DSN 923-2134 then dial extension  
 (301) 677-2134      “  
 (410) 712-0137      “

FAX CONNECTIVITY DIRECT DIAL (24 hours)  
 DSN 923-5352 or (301) 677-5352 (AAMD work area)  
 (410) 712-4759 (no DSN) (MPD work area)  
 (Faxes to either number will be given to recipient)

## **ATTACHE MANAGEMENT DIVISION**

2631    \*^CW3 PACE, Michael (Chief, AMD)  
 2633    \*^SFC JENSEN, Bernie .P. (Enlisted Asg Mgr)  
 2634    \*^SSG ROSS (BROADNAX), Andrea (Admin)  
 2632    \*^MR. STRINGFELLOW, Dave (Scty/RepProg/FLPP)  
 2630    \*^MRS. GRAF, Reba.J. (FEML)

## **MILITARY PERSONNEL DIVISION**

7721    \*^CW5 PIATTI, Thomas A. (Ch, MPD) (Grey 981-4526)  
 7719    \*^Mr. POPEJOY, Michael W. (Dep, MPD/PSC Supv)  
 7717    \*^SFC(P) ROBINSON, Melvin L. Sr...(NCOIC)  
 7714    \*^Ms. BROWN, Travisha (Evals/Selection Bd Screening)  
 7715    \*^Ms. REITZIG, Annette (Reassignment Processing)  
 7716    \*^Ms. WATKOSKI, Mary Lynn. (Off/Enl Rcds)  
 7742    \*^SSG COOPER. Kim (Leave Control/Finance Transmittal)  
 7740    \*^Ms. HUTCHINSON, Katie (Ret/Separations/CCA/Stu Trvl)  
 7723    \*^Mrs. MONK, Tonya (Foreign Lang Pro Pay)

\* denotes HOCNET Address INTERNET Address: piattit@meade-emh2.ftmeade.army.mil or TOMPIATTI@AOL.COM  
 ^ denotes DIA NT Addressee Message address: CDRUSAFSC FT MEADE MD//IAFS-P-A//

## **FINANCE**

(Joint Field Support Center, DIA)

ADDRESSES:      COMMANDER  
                       ATTN JFSC 1  
                       JOINT FIELD SUPPORT CENTER  
                       375 CHAMBERLIN AVE SUITE 5900  
                       FORT MEADE MD 20755-5900

JFSC  
                       Finance and Accounting Office  
                       7321 Parkway Drive South  
                       Hanover, MD 21076  
                       (Use this address for express mail)

TELEPHONE CONNECTIVITY  
 DSN 923-2134 then dial extension  
 (301) 677-2134      “  
 (410) 712-0137      “

FAX CONNECTIVITY (24 hours)  
 DSN 923-3366  
 (301) 677-3366  
 (410) 712-0524 or (410) 712-0489

3261....\*^LTC Cook, Robert T. (Resource Mgr)  
 3262....\*^CPT Durden, Rachel .(Finance/Acctg Off)  
 6451....\*^SFC Cosby, William N. (Finance NCOIC)  
 8851....\*^SSG Twitty, Kenneth (NCOIC Travel Section)  
 3260....(Travel Customer Service )

6450....\*^SSG Morrison, Lisa D. (NCOIC Mil Pay)  
 6453....\*^SGT Kinlaw, Michelle D. (Pay Inquiries)  
 6454....\*^SGT Jones, Thomas R. (Debt Mgmt/Letters)  
 3471....(NCOIC Disbursing)

Secure fax: DSN 923-2134 ext 2235 or (301) 677-2134 ext 2235 (manual)  
 Message address: CDRJFSC FT MEADE MD//JFSC-1//  
 Internet: [jfscfao@meade-emh2.ftmeade.army.mil](mailto:jfscfao@meade-emh2.ftmeade.army.mil)

Prepared 1 September 2000

## **CHAPTER 17**

### **EMBASSY GLOSSARY**

A/ARMA – Assistant Army Attaché

AIRA – Air Force Attaché

ALUSNA – Naval Attaché

ARMA - Army Attaché

BFO – Budget & Finance Office/Officer

Chancellery – The main “working” building of the embassy, usually closed to the public

CLO – Community Liaison Office/Officer (sort of like MWR)

Consulate – open to the public for visas, helps Americans abroad, etc.

COM – Chief of Mission (the Ambassador)

DAO – Defense Attaché Office

DATT – Defense Attaché

DCM – Deputy Chief of Mission (the Embassy XO)

GSO – General Services Office (Officer) (sort of like the embassy S4)

ICASS – International Cooperative Administrative Services

ODC – Office of Defense Cooperation (Security Assistance)

OPSCO – Operations Coordinator (a Warrant Officer or Senior NCO in the DAO)

PNG – *Persona non Grata* (Latin for “booted out of country”)

POST 1 – Main USMC guard post

RSO – Regional Security Officer (sort of like the S2/provost marshal)

The Residence – Where the ambassador lives

SAO – Security Assistance Office (Officer)

## **CHAPTER 18**

### **FREQUENTLY ASKED QUESTIONS**

- 1. Why can't I transfer funds between programs (P32 and P19)?** The funds are entirely different Congressional budget appropriations. Shifting funds from one to the other is illegal.
- 2. How can I get funding for language training in country?** The Army does not routinely fund formal language training in country. ICT is language training. The Army derives little benefit from training ICT FAOs in dialects and local languages and will not approve such requests. FAOs are regional experts and as such must focus on developing language abilities that have broadest applicability. The chances a FAO can acquire real proficiency in a third language, can maintain proficiency, and later be utilized in an assignment where the Army can benefit from such expertise is doubtful. For special cases, such as where we have French linguists in ICT in Anglophone countries, we've made exceptions and funded tutoring.
- 3. Why can't I get a new FAO vehicle?** Because demand for vehicles far outstrips our resources, we do not have the ability to purchase vehicles. As with P19 funds, we are a line in someone else's budget, in this instance, TACOM. With an average allocation of 2-4 vehicles a year, we can only fill the most urgent requirements.
- 4. Can I use the FAO vehicle for "official business" that is not regional travel?** If you're not on FAO-funded TDY, you should probably not be using the FAO vehicle. AR 58-1 (Management, Acquisition, and Use of Administrative Use Motor Vehicles) establishes Army-wide policy. Using a FAO vehicle for commuting to and from a school location, even if it is not from the FAO residence, does not meet the intent of the FAO Vehicle Program. Also, FAO vehicles should not be used to conduct DAO or SAO business. Those agencies have their own resources. Bottom line: the FAO vehicle is an Army asset intended to support ICT regional travel.
- 5. What are the rules governing Civilian Clothing Allowances (CCA)? How do I apply?** AR 700-84 (Issue and Sale of Personal Clothing) establishes the criteria and tells you how to apply. Many FAOs are authorized CCA. Determination will be made by the immediate chain of command (ie, SAO or DAO, etc) once you arrive in country, IAW the circumstances in AR 700-84. If appropriate, the FAO will complete a request for CCA and forward through his/her chain of command to the US Army Field Support Center (ATTN:IASV-P), Fort Meade, MD, for verification and approval. A copy of the FAO's orders must accompany the form.
- 6. How do I apply for Permissive Jump Status (PJS)?** Msg, HQDA, DAPE-MPE-DR, 221646Z Aug 95, establishes DA policy on PJS. Any FAO wishing to conduct airborne training while on ICT must be on valid PJS. A FAO must meet minimum requirements of 3 cumulative years of parachute duty in an airborne position, an ASI of either "5P" or "5S", and must undergo airborne refresher training within six months prior to the date of permissive parachute jump. Other conditions apply. FAOs meeting all



requirements will forward a memorandum through their immediate chain of command to the FAO Proponent for approval by the Deputy Director, DAMO-SS.

**7. Who is entitled to frocking? How is it done?** AR 600-8-29 (Officer Promotions) establishes DA policy for frocking. FAO are normally frocked from CPT (P) to MAJ when their ICT involves attendance to a CSC-type course and the chain of command has determined that this is required. The FAO's immediate chain of command will forward a request to the FAO Proponent IAW AR 600-8-29.

**8. Are ICT FAOs authorized representational funds?** No. ICT FAOs are not authorized to conduct official representational activities.

**9. Who has UCMJ authority over FAOs?** HQDA General Order No. 16, dated 9 Sep 77, gives the Commanding General, U.S. Army Military District of Washington, UCMJ jurisdiction over all "Department of the Army Attaché personnel assigned to the U.S. Army Element, Defense Attach System, and Department of the Army personnel attached to Defense Attaché offices for administrative support and services." This includes our FAO ICT trainees. The Commander, MDW's jurisdiction is for "all matters pertaining to the administration of military justice, including general court-martial jurisdiction." The Commander, MDW, may delegate this authority upon request.

**10. Who has force protection responsibility for FAOs in ICT?** The Ambassador, as Chief of Mission has this duty. The governing references are the Foreign Service Act of 1980 and the 1986 Diplomatic Security Act. These acts place the responsibility for physical security and force protection for all U.S. government personnel and accompanying family members in a foreign country (**except those under the command of a United States area military commander**) with the Chief of Mission. Specifically:

The Foreign Service Act of 1980, section 207, states the Chief of Mission "shall have full responsibility for the direction, coordination and supervision of all Government Executive Branch employees in that country (except for employees under the command of a United States area military commander)."

The 1986 Diplomatic Security Act, section 103, states the Secretary of State "shall develop and implement (in consultation with the heads of other Federal agencies having personnel or missions abroad...) policies and programs, including funding levels and standards, to provide for the security of United States Government operations of a diplomatic nature...Such policies and programs shall include – protection of all United States Government personnel on official duty abroad (other than those personnel under command of a United States area military commander) and their accompanying dependents."

For most ICT FAOs, this means the Ambassador (through members of the staff such as the Regional Security Officer) is responsible for force protection. In all cases, DAMO-SSF coordinates with the responsible agencies to ensure appropriate levels of oversight exist. For those sites where the ICT trainee is not formally part of the embassy's housing pool, the required oversight and modifying of quarters can be contracted through ICASS.

**11. Are FAOs authorized FLPP during their ICT?** Yes, you are authorized FLPP pay as soon as you graduate from DLI. Your servicing PAC (the Field Support Center for most ICT FAOs) can assist in starting your FLPP pay. You must retake the DLPT annually.